

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 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 01 / 01 / 2023 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2023

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 07 / 31 / 2023

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**

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="2023"/>		<input type="text" value="216592.21"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="216592.21"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="220964.06"/>	<input type="text" value="220964.06"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="437556.27"/>	<input type="text" value="437556.27"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="387761.37"/>	<input type="text" value="387761.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="49794.90"/>	<input type="text" value="49794.90"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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).....	16963.00	16963.00
(ii) Unitemized	8545.78	8545.78
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	25508.78	25508.78
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	64500.00	64500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	90008.78	90008.78
12. Transfers From Affiliated/Other Party Committees.....	130955.28	130955.28
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)).....▶	220964.06	220964.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	220964.06	220964.06

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	98011.37	98011.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	98011.37	98011.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	289500.00	289500.00
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).....	250.00	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)) ..	387761.37	387761.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	387761.37	387761.37

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	90008.78	90008.78
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	90008.78	90008.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	98011.37	98011.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	98011.37	98011.37

**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 266
	<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	<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)
E-PAC

A. RICHARDS, MARY, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 330 6TH ST S
City NAPLES State FL Zip Code 34102-6349
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 ▼ 2608.33

Date of Receipt 01 / 17 / 2023
Transaction ID : SA11A.697253
Amount of Each Receipt this Period - 50.00
 Memo Item CONTRIBUTION
2022 AGGREGATE; CHARGED BACK

B. RICHARDS, MARY, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 330 6TH ST S
City NAPLES State FL Zip Code 34102-6349
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 ▼ 2608.33

Date of Receipt 01 / 17 / 2023
Transaction ID : SA11A.697254
Amount of Each Receipt this Period - 50.00
 Memo Item CONTRIBUTION
2022 AGGREGATE; CHARGED BACK

C. 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 ▼ 20761.09

Date of Receipt 01 / 17 / 2023
Transaction ID : SA11C.697221
Amount of Each Receipt this Period 1778.89
 Memo Item CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ▶ - 100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 266
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
E-PAC

A. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **01 / 17 / 2023**
Transaction ID : SA11A.697245
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. LUBARD, STEPEHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4812 DON JUAN PL
 City WOODLAND HILLS State CA Zip Code 91364-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S-L TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **01 / 17 / 2023**
Transaction ID : SA11A.697247
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. REA, BONITA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11459 HACKETT RD
 City ROSWELL State GA Zip Code 30075-2307
 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 ▼ 1800.00

Date of Receipt **01 / 17 / 2023**
Transaction ID : SA11A.697252
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
E-PAC

A. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt **01 / 17 / 2023**
Transaction ID : SA11A.697229
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. RICHARDS, MARY, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 6TH ST S
 City NAPLES State FL Zip Code 34102-6349
 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 ▼ 2608.33

Date of Receipt **02 / 14 / 2023**
Transaction ID : SA11A.706290
 Amount of Each Receipt this Period - 500.00
 Memo Item CONTRIBUTION
 2022 AGGREGATE; CHARGED BACK

C. RICHARDS, MARY, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 6TH ST S
 City NAPLES State FL Zip Code 34102-6349
 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 ▼ 2608.33

Date of Receipt **02 / 14 / 2023**
Transaction ID : SA11A.706291
 Amount of Each Receipt this Period - 250.00
 Memo Item CONTRIBUTION
 2022 AGGREGATE; CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....▶	- 745.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
E-PAC

A. RICHARDS, MARY, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 6TH ST S
 City NAPLES State FL Zip Code 34102-6349
 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 ▼ 2608.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706292
 Amount of Each Receipt this Period
 - 125.00
 Memo Item
CONTRIBUTION
 2022 AGGREGATE; CHARGED BACK

B. RICHARDS, MARY, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 6TH ST S
 City NAPLES State FL Zip Code 34102-6349
 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 ▼ 2608.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706293
 Amount of Each Receipt this Period
 - 100.00
 Memo Item
CONTRIBUTION
 2022 AGGREGATE; CHARGED BACK

C. RICHARDS, MARY, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 6TH ST S
 City NAPLES State FL Zip Code 34102-6349
 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 ▼ 2608.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706294
 Amount of Each Receipt this Period
 - 100.00
 Memo Item
CONTRIBUTION
 2022 AGGREGATE; CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....	- 325.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 266
	<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. RICHARDS, MARY, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 330 6TH ST S

City NAPLES State FL Zip Code 34102-6349

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 ▼
2608.33

Date of Receipt
MM / DD / YYYY
02 / 14 / 2023

Transaction ID : SA11A.706295

Amount of Each Receipt this Period
- 50.00

Memo Item CONTRIBUTION

2022 AGGREGATE; CHARGED BACK

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 ▼
20761.09

Date of Receipt
MM / DD / YYYY
02 / 14 / 2023

Transaction ID : SA11C.706114

Amount of Each Receipt this Period
2394.03

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WILLARDS WAY

City YORKTOWN State VA Zip Code 23693-2544

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 ▼
435.50

Date of Receipt
MM / DD / YYYY
02 / 14 / 2023

Transaction ID : SA11A.706189

Amount of Each Receipt this Period
4.50

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ - 45.50

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 11 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706190
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706191
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706192
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	13.50
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:	PAGE 12 OF 266
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WILLARDS WAY

City YORKTOWN	State VA	Zip Code 23693-2544
------------------	-------------	------------------------

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 ▼
435.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2023

Transaction ID : SA11A.706196

Amount of Each Receipt this Period
4.50

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WILLARDS WAY

City YORKTOWN	State VA	Zip Code 23693-2544
------------------	-------------	------------------------

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 ▼
435.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2023

Transaction ID : SA11A.706200

Amount of Each Receipt this Period
4.50

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WILLARDS WAY

City YORKTOWN	State VA	Zip Code 23693-2544
------------------	-------------	------------------------

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 ▼
435.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2023

Transaction ID : SA11A.706208

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	14.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706250
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706251
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. 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
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706279
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 266
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,			Date of Receipt MM / DD / YYYY 02 / 14 / 2023
Mailing Address 4101 PEBBLE CREEK DR.			Transaction ID : SA11A.706246
City EULESS	State TX	Zip Code 76040-5951	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,			Date of Receipt MM / DD / YYYY 02 / 14 / 2023
Mailing Address 4101 PEBBLE CREEK DR.			Transaction ID : SA11A.706259
City EULESS	State TX	Zip Code 76040-5951	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,			Date of Receipt MM / DD / YYYY 02 / 14 / 2023
Mailing Address 4101 PEBBLE CREEK DR.			Transaction ID : SA11A.706262
City EULESS	State TX	Zip Code 76040-5951	Amount of Each Receipt this Period 12.50
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	32.50
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 15 OF 266
	<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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706263
 Amount of Each Receipt this Period 12.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. O'KEEFFE, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 LAGUNA HONDA BLVD
 City SAN FRANCISCO State CA Zip Code 94127-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAFTI Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706289
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. REA, BONITA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11459 HACKETT RD
 City ROSWELL State GA Zip Code 30075-2307
 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 ▼ 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706285
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	362.50
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 16 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REA, BONITA, K., ,

Mailing Address 11459 HACKETT RD

City ROSWELL	State GA	Zip Code 30075-2307
-----------------	-------------	------------------------

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 ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023

Transaction ID : SA11A.706287

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REA, BONITA, K., ,

Mailing Address 11459 HACKETT RD

City ROSWELL	State GA	Zip Code 30075-2307
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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 ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023

Transaction ID : SA11A.706288

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SOMMERFELD, MARGO, , ,

Mailing Address 4454 CASITAS ST

City SAN DIEGO	State CA	Zip Code 92107-4218
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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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023

Transaction ID : SA11A.706151

Amount of Each Receipt this Period
1.50

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	501.50
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 17 OF 266
	<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. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt 02 / 14 / 2023
Transaction ID : SA11A.706172
 Amount of Each Receipt this Period 2.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt 02 / 14 / 2023
Transaction ID : SA11A.706197
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt 02 / 14 / 2023
Transaction ID : SA11A.706248
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 17.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
E-PAC

A. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706252
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706254
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. WRIGHT, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 TIMBERWICK RD
 City SANTA FE State NM Zip Code 87508-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW MEXICANN NATURAL MEDICINE Occupation (for Individual) PRODUCT DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2023
Transaction ID : SA11A.706283
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 266
	<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. WRIGHT, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 TIMBERWICK RD
 City SANTA FE State NM Zip Code 87508-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW MEXICANN NATURAL MEDICINE Occupation (for Individual) PRODUCT DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 14 / 2023
Transaction ID : SA11A.706284
 Amount of Each Receipt this Period 100.00
 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 ▼ 20761.09

Date of Receipt 02 / 21 / 2023
Transaction ID : SA11C.708486
 Amount of Each Receipt this Period 2883.03
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt 02 / 21 / 2023
Transaction ID : SA11A.708496
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	104.50
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 20 OF 266
	<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. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2023
Transaction ID : SA11A.708506
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2023
Transaction ID : SA11A.708507
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2023
Transaction ID : SA11A.708510
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 266
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KIMBELL, JEFFREY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 21 / 2023
Mailing Address 950 AERIE DR.			Transaction ID : SA11A.708513
City PARK CITY	State UT	Zip Code 84060-8846	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) HEALTH CARE CONSULTANT	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LUBARD, STEPEHN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 21 / 2023
Mailing Address 4812 DON JUAN PL			Transaction ID : SA11A.708512
City WOODLAND HILLS	State CA	Zip Code 91364-4704	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) S-L TECH		Occupation (for Individual) ENGINEER	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WRIGHT, CYNTHIA, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 21 / 2023
Mailing Address 27 TIMBERWICK RD			Transaction ID : SA11A.708505
City SANTA FE	State NM	Zip Code 87508-8948	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NEW MEXICANN NATURAL MEDICINE		Occupation (for Individual) PRODUCT DEVELOPMENT	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 280.00		

SUBTOTAL of Receipts This Page (optional).....	2625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 266
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input 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. 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 ▼
20761.09

Date of Receipt
MM / DD / YYYY
02 / 28 / 2023
Transaction ID : SA11C.712444

Amount of Each Receipt this Period
412.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107 WILLARDS WAY

City YORKTOWN	State VA	Zip Code 23693-2544
------------------	-------------	------------------------

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 ▼
435.50

Date of Receipt
MM / DD / YYYY
02 / 28 / 2023
Transaction ID : SA11A.712476

Amount of Each Receipt this Period
4.50

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107 WILLARDS WAY

City YORKTOWN	State VA	Zip Code 23693-2544
------------------	-------------	------------------------

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 ▼
435.50

Date of Receipt
MM / DD / YYYY
02 / 28 / 2023
Transaction ID : SA11A.712478

Amount of Each Receipt this Period
4.50

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	9.00
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 23 OF 266
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)
E-PAC

A. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712479
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712490
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712491
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	24.50
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:	PAGE 24 OF 266
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
E-PAC

A. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WILLARDS WAY

City YORKTOWN	State VA	Zip Code 23693-2544
------------------	-------------	------------------------

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 ▼
435.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2023

Transaction ID : SA11A.712502

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

B. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WILLARDS WAY

City YORKTOWN	State VA	Zip Code 23693-2544
------------------	-------------	------------------------

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 ▼
435.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2023

Transaction ID : SA11A.712503

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2023

Transaction ID : SA11A.712492

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 266
	<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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712493
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712472
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712482
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	19.00
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 26 OF 266
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
E-PAC

A. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712483
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712484
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712498
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶ 19.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 266
	<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. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712506
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2023
Transaction ID : SA11A.712507
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. 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 ▼ 20761.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11C.715052
 Amount of Each Receipt this Period 1031.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BURGESS, RICHARD, , ,			Date of Receipt MM / DD / YYYY 03 / 07 / 2023 Transaction ID : SA11A.715089	
Mailing Address 107 WILLARDS WAY			Amount of Each Receipt this Period 4.50	
City YORKTOWN	State VA	Zip Code 23693-2544	Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			EARMARKED FROM WINRED	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 435.50		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BURGESS, RICHARD, , ,			Date of Receipt MM / DD / YYYY 03 / 07 / 2023 Transaction ID : SA11A.715113	
Mailing Address 107 WILLARDS WAY			Amount of Each Receipt this Period 25.00	
City YORKTOWN	State VA	Zip Code 23693-2544	Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			EARMARKED FROM WINRED	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 435.50		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BURGESS, RICHARD, , ,			Date of Receipt MM / DD / YYYY 03 / 07 / 2023 Transaction ID : SA11A.715116	
Mailing Address 107 WILLARDS WAY			Amount of Each Receipt this Period 25.00	
City YORKTOWN	State VA	Zip Code 23693-2544	Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			EARMARKED FROM WINRED	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 435.50		

SUBTOTAL of Receipts This Page (optional).....▶	54.50
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:	PAGE 29 OF 266
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715117
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715123
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. 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
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715126
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 266
	<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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2023

Transaction ID : SA11A.715094

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2023

Transaction ID : SA11A.715101

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2023

Transaction ID : SA11A.715119

Amount of Each Receipt this Period
42.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	52.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 266
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715120
 Amount of Each Receipt this Period 42.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715121
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715122
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	142.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REA, BONITA, K., ,

Mailing Address 11459 HACKETT RD

City ROSWELL	State GA	Zip Code 30075-2307
-----------------	-------------	------------------------

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 ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023

Transaction ID : SA11A.715127

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REA, BONITA, K., ,

Mailing Address 11459 HACKETT RD

City ROSWELL	State GA	Zip Code 30075-2307
-----------------	-------------	------------------------

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 ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023

Transaction ID : SA11A.715128

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SOMMERFELD, MARGO, , ,

Mailing Address 4454 CASITAS ST

City SAN DIEGO	State CA	Zip Code 92107-4218
-------------------	-------------	------------------------

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023

Transaction ID : SA11A.715065

Amount of Each Receipt this Period
1.50

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	201.50
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:	PAGE 33 OF 266
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input 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. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715073
 Amount of Each Receipt this Period
 2.50
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715074
 Amount of Each Receipt this Period
 2.50
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

C. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715075
 Amount of Each Receipt this Period
 2.50
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	7.50
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 34 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
E-PAC

A. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715076
 Amount of Each Receipt this Period 2.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715080
 Amount of Each Receipt this Period 3.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715081
 Amount of Each Receipt this Period 3.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	8.50
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 35 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
E-PAC

A. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715091
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715111
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2023
Transaction ID : SA11A.715112
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	54.50
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 36 OF 266
	<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. WRIGHT, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 TIMBERWICK RD
 City SANTA FE State NM Zip Code 87508-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW MEXICANN NATURAL MEDICINE Occupation (for Individual) PRODUCT DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 07 / 2023
Transaction ID : SA11A.715125
 Amount of Each Receipt this Period 50.00
 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 ▼ 20761.09

Date of Receipt 03 / 14 / 2023
Transaction ID : SA11C.716184
 Amount of Each Receipt this Period 1327.25
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt 03 / 14 / 2023
Transaction ID : SA11A.716204
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	54.50
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 37 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2023
Transaction ID : SA11A.716213
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. RADGOWSKI, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 BAYVIEW AVE
 City NORTHPORT State NY Zip Code 11768-1505
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2023
Transaction ID : SA11A.716220
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2023
Transaction ID : SA11A.716217
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	1040.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 266
	<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
-------------------	-------------	------------------------

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 ▼
20761.09

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2023
Transaction ID : SA11C.720110

Amount of Each Receipt this Period
426.50

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107 WILLARDS WAY

City YORKTOWN	State VA	Zip Code 23693-2544
------------------	-------------	------------------------

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 ▼
435.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2023
Transaction ID : SA11A.720133

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. LUBARD, STEPEHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4812 DON JUAN PL

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 ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2023
Transaction ID : SA11A.720140

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	125.00
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 39 OF 266
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
E-PAC

A. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt 03 / 21 / 2023
Transaction ID : SA11A.720134
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SARCONI, JOHN, A., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 FOX RUN RD
 City CROTON ON HUDSON State NY Zip Code 10520-3706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2023
Transaction ID : SA11A.721660
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TAYLOR, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 W LOVERS LN
 City DALLAS State TX Zip Code 75209-4330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER/INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 24 / 2023
Transaction ID : SA11A.721716
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5525.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 266
	<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
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 ▼ 20761.09

Date of Receipt 03 / 28 / 2023
Transaction ID : SA11C.725503
Amount of Each Receipt this Period 296.50
 Memo Item CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. BURGESS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107 WILLARDS WAY
City YORKTOWN State VA Zip Code 23693-2544
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 ▼ 435.50

Date of Receipt 03 / 28 / 2023
Transaction ID : SA11A.725573
Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
EARMARKED FROM WINRED

C. SHAW, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14 SYLVAN WAY
City PARSIPPANY State NJ Zip Code 07054-3834
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual) LINCOLN EDUCATIONAL SERVICES EDUCATION
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 29 / 2023
Transaction ID : SA11A.725858
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1004.50
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 41 OF 266
	<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
-------------------	-------------	------------------------

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 ▼
20761.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2023

Transaction ID : SA11C.733736

Amount of Each Receipt this Period
1040.50

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. ARCHER, LYNNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 SAINT PETERS WALK

City SUGAR LAND	State TX	Zip Code 77479-2525
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
ARCHER AUTO GROUP SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2023

Transaction ID : SA11A.733888

Amount of Each Receipt this Period
- 500.00

Memo Item
CONTRIBUTION

2023 AGGREGATE; CHARGED BACK

C. ARCHER, LYNNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 SAINT PETERS WALK

City SUGAR LAND	State TX	Zip Code 77479-2525
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
ARCHER AUTO GROUP SECRETARY

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2023

Transaction ID : SA11A.733792

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2023
Transaction ID : SA11A.733765
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2023
Transaction ID : SA11A.733766
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2023
Transaction ID : SA11A.733768
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	13.50
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 43 OF 266
	<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. 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
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2023
Transaction ID : SA11A.733791
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2023
Transaction ID : SA11A.733778
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2023
Transaction ID : SA11A.733787
 Amount of Each Receipt this Period
 42.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	102.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 266
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2023
Transaction ID : SA11A.733782
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. WRIGHT, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 TIMBERWICK RD
 City SANTA FE State NM Zip Code 87508-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW MEXICANN NATURAL MEDICINE Occupation (for Individual) PRODUCT DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2023
Transaction ID : SA11A.733775
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. 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 ▼ 20761.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2023
Transaction ID : SA11C.733793
 Amount of Each Receipt this Period 872.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 266
	<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. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt **04 / 11 / 2023**
Transaction ID : SA11A.733857
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **04 / 11 / 2023**
Transaction ID : SA11A.733874
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **04 / 11 / 2023**
Transaction ID : SA11A.733875
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 11 / 2023
Mailing Address 4101 PEBBLE CREEK DR.			Transaction ID : SA11A.733881
City EULESS	State TX	Zip Code 76040-5951	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WIPPERMAN, LARRY, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 11 / 2023
Mailing Address PO BOX 1363			Transaction ID : SA11A.733879
City KAPAAU	State HI	Zip Code 96755-1363	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 984.10	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WINRED			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2023
Mailing Address PO BOX 9891			Transaction ID : SA11C.737465
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 1224.00
FEC ID number of contributing federal political committee. C C00694323			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)		Occupation (for Individual)	SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 20761.09	

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 266
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BIEBIGHAUSER, VICTOR, K., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2023
Mailing Address 2424 CHEROKEE DR.			Transaction ID : SA11A.737501
City MONTGOMERY	State AL	Zip Code 36111-1609	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SOUTH UNIVERSITY OF ALABAMA INC.		Occupation (for Individual) PRESIDENT	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BURGESS, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2023
Mailing Address 107 WILLARDS WAY			Transaction ID : SA11A.737487
City YORKTOWN	State VA	Zip Code 23693-2544	Amount of Each Receipt this Period 4.50
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.50		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BURGESS, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2023
Mailing Address 107 WILLARDS WAY			Transaction ID : SA11A.737488
City YORKTOWN	State VA	Zip Code 23693-2544	Amount of Each Receipt this Period 4.50
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 435.50		

SUBTOTAL of Receipts This Page (optional).....	1009.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 266
	<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. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt **04 / 18 / 2023**
Transaction ID : SA11A.737489
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. LUBARD, STEPEHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4812 DON JUAN PL
 City WOODLAND HILLS State CA Zip Code 91364-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S-L TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 18 / 2023**
Transaction ID : SA11A.737500
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. 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 ▼ 20761.09

Date of Receipt **04 / 25 / 2023**
Transaction ID : SA11C.739706
 Amount of Each Receipt this Period 342.50
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....	104.50
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 49 OF 266
	<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. BURGESS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WILLARDS WAY
 City YORKTOWN State VA Zip Code 23693-2544
 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 ▼ 435.50

Date of Receipt **04 / 25 / 2023**
Transaction ID : SA11A.739744
 Amount of Each Receipt this Period 25.00
 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 ▼ 20761.09

Date of Receipt **05 / 02 / 2023**
Transaction ID : SA11C.742347
 Amount of Each Receipt this Period 335.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. 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
 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 ▼ 300.00

Date of Receipt **05 / 02 / 2023**
Transaction ID : SA11A.742386
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 266
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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. 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 ▼
20761.09

Date of Receipt
MM / DD / YYYY
05 / 09 / 2023
Transaction ID : SA11C.745185

Amount of Each Receipt this Period
340.50

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2023
Transaction ID : SA11A.745216

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2023
Transaction ID : SA11A.745219

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	20.00
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 51 OF 266
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
E-PAC

A. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **05 / 09 / 2023**
Transaction ID : SA11A.745226
 Amount of Each Receipt this Period 42.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **05 / 09 / 2023**
Transaction ID : SA11A.745227
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. 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 ▼ 20761.09

Date of Receipt **05 / 16 / 2023**
Transaction ID : SA11C.781552
 Amount of Each Receipt this Period 438.50
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶	92.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. LUBARD, STEPEHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4812 DON JUAN PL
 City WOODLAND HILLS State CA Zip Code 91364-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S-L TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 16 / 2023
Transaction ID : SA11A.781625
 Amount of Each Receipt this Period 100.00
 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 ▼ 20761.09

Date of Receipt 06 / 06 / 2023
Transaction ID : SA11C.760036
 Amount of Each Receipt this Period 1472.75
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. 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
 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 ▼ 300.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA11A.760141
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA11A.760142
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA11A.760143
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA11A.760087
 Amount of Each Receipt this Period 2.50
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	502.50
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 54 OF 266
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
E-PAC

A. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA11A.760138
 Amount of Each Receipt this Period 42.00
 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 ▼ 20761.09

Date of Receipt 06 / 13 / 2023
Transaction ID : SA11C.764147
 Amount of Each Receipt this Period 994.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 13 / 2023
Transaction ID : SA11A.764217
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	167.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 266
	<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	

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. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA11A.769503
 Amount of Each Receipt this Period - 125.00
 Memo Item
CONTRIBUTION
 2023 AGGREGATE; CHARGED BACK

B. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 13 / 2023
Transaction ID : SA11A.764218
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM WINRED

C. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA11A.769501
 Amount of Each Receipt this Period - 500.00
 Memo Item
CONTRIBUTION
 2023 AGGREGATE; CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....	- 125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 13 / 2023
Transaction ID : SA11A.764201
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 13 / 2023
Transaction ID : SA11A.764207
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. 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 ▼ 20761.09

Date of Receipt 06 / 20 / 2023
Transaction ID : SA11C.769428
 Amount of Each Receipt this Period 1170.30
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA11A.769499
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA11A.769502
 Amount of Each Receipt this Period - 250.00
 Memo Item CONTRIBUTION
 2023 AGGREGATE; CHARGED BACK

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA11A.769487
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 266
	<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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA11A.769489
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. LUBARD, STEPEHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4812 DON JUAN PL
 City WOODLAND HILLS State CA Zip Code 91364-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S-L TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA11A.769498
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. O'KEEFFE, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 LAGUNA HONDA BLVD
 City SAN FRANCISCO State CA Zip Code 94127-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAFTI Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA11A.769500
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	365.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 266
	<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. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA11A.769465
 Amount of Each Receipt this Period 4.50
 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 ▼ 20761.09

Date of Receipt 06 / 27 / 2023
Transaction ID : SA11C.773524
 Amount of Each Receipt this Period 576.05
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. HILL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 E MAIN ST
 City MOORESTOWN State NJ Zip Code 08057-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 27 / 2023
Transaction ID : SA11A.773599
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶ 129.50
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 60 OF 266
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input 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)
E-PAC

A. HILL, VERNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 E MAIN ST

City MOORESTOWN State NJ Zip Code 08057-2931

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

Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt
06 / 30 / 2023
Transaction ID : SA11A.778220

Amount of Each Receipt this Period
- 125.00

Memo Item
CONTRIBUTION

2023 AGGREGATE; CHARGED BACK

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼
5000.00

Date of Receipt
06 / 27 / 2023
Transaction ID : SA11A.773580

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼
5000.00

Date of Receipt
06 / 27 / 2023
Transaction ID : SA11A.773585

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ - 115.00

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 61 OF 266
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input 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)
E-PAC

A. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA11A.773586

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA11A.773591

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA11A.773597

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 266
	<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. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt 06 / 27 / 2023
Transaction ID : SA11A.773563
 Amount of Each Receipt this Period 2.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. SOMMERFELD, MARGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST
 City SAN DIEGO State CA Zip Code 92107-4218
 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 ▼ 205.00

Date of Receipt 06 / 27 / 2023
Transaction ID : SA11A.773578
 Amount of Each Receipt this Period 4.50
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. HIRSCHMANN, SUSAN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4875 MAURY LN
 City ALEXANDRIA State VA Zip Code 22304-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS JENSEN Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 28 / 2023
Transaction ID : SA11A.774497
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1007.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 266
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input 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. NUNEZ, REV. EVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3804 ELMWOOD TOWNE WAY
 City ALEXANDRIA State VA Zip Code 22303-1161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROPERTY MANAGEMENT Occupation (for Individual) CHEF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2023
Transaction ID : SA11A.774833
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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 ▼ 20761.09

Date of Receipt 06 / 30 / 2023
Transaction ID : SA11C.778166
 Amount of Each Receipt this Period 826.30
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. BROWN, OLIVE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 PHOENIX AVE NE
 City ALBUQUERQUE State NM Zip Code 87110-3568
 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 ▼ 230.00

Date of Receipt 06 / 30 / 2023
Transaction ID : SA11A.778214
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 266
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
E-PAC

A. BROWN, OLIVE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 PHOENIX AVE NE
 City ALBUQUERQUE State NM Zip Code 87110-3568
 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 ▼ 230.00

Date of Receipt 06 / 30 / 2023
Transaction ID : SA11A.778215
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. BROWN, OLIVE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 PHOENIX AVE NE
 City ALBUQUERQUE State NM Zip Code 87110-3568
 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 ▼ 230.00

Date of Receipt 06 / 30 / 2023
Transaction ID : SA11A.778216
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. BROWN, OLIVE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 PHOENIX AVE NE
 City ALBUQUERQUE State NM Zip Code 87110-3568
 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 ▼ 230.00

Date of Receipt 06 / 30 / 2023
Transaction ID : SA11A.778218
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 266
	<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. 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
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2023
Transaction ID : SA11A.778217
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. WILSON, RANSOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 PARK AVE
 City NEW YORK State NY Zip Code 10028-1031
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2023
Transaction ID : SA11A.778219
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

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

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	16963.00

**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 66 OF 266
<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 ASSOCIATION OF CONVENIENCE STORES PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 DUKE ST
 City ALEXANDRIA State VA Zip Code 22314-3466
 FEC ID number of contributing federal political committee. **C** C00126763
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2023
Transaction ID : SA11C.705105
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

B. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 N MICHIGAN AVE
 City CHICAGO State IL Zip Code 60611-4011
 FEC ID number of contributing federal political committee. **C** C00030718
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2023
Transaction ID : SA11C.707997
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

C. AMERICAN MEDICAL ASSOCIATION PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 MASSACHUSETTS AVE NW STE 600
 City WASHINGTON State DC Zip Code 20001-7400
 FEC ID number of contributing federal political committee. **C** C00000422
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2023
Transaction ID : SA11C.715173
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 266
<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. FRESENIUS MEDICAL CARE HOLDINGS, INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 PENNSYLVANIA AVE NW STE 255
 City WASHINGTON State DC Zip Code 20004-3637
 FEC ID number of contributing federal political committee. **C** C00401299
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2023
Transaction ID : SA11C.715172
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

B. IHG OWNERS ASSOCIATION INN-PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address THREE RAVINIA DRIVE SUITE 100
 City ATLANTA State GA Zip Code 30346-2121
 FEC ID number of contributing federal political committee. **C** C00084822
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2023
Transaction ID : SA11C.715171
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

C. NATIONAL EMERGENCY MEDICINE PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 619911
 City DALLAS State TX Zip Code 75261-9911
 FEC ID number of contributing federal political committee. **C** C00140061
 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
 03 / 22 / 2023
Transaction ID : SA11C.721405
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 266
<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. BUILDPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 15TH ST NW
City WASHINGTON State DC Zip Code 20005-2899
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 03 / 31 / 2023
Transaction ID : SA11C.730439
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. INVESTMENT COMPANY INSTITUTE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1401 H ST NW STE 1200
City WASHINGTON State DC Zip Code 20005-2110
FEC ID number of contributing federal political committee. **C** C00105981
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2023
Transaction ID : SA11C.730438
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA INC PAC (I
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 F ST NW STE 610
City WASHINGTON State DC Zip Code 20001-6707
FEC ID number of contributing federal political committee. **C** C00022343
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 30 / 2023
Transaction ID : SA11C.755814
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 266
<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 MULTIFAMILY HOUSING COUNCIL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 I ST NW STE 1100

City WASHINGTON	State DC	Zip Code 20006-2424
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00130773

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
06	/	27	/	2023

Transaction ID : SA11C.774368

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC (AICP)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 220 LEIGH FARM RD

City DURHAM	State NC	Zip Code 27707-8110
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00077321

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
06	/	30	/	2023

Transaction ID : SA11C.774798

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. FRATERNITY AND SORORITY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 40383

City WASHINGTON	State DC	Zip Code 20016-0383
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00410068

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
06	/	30	/	2023

Transaction ID : SA11C.774797

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 266
<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. GENERAL MOTORS COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 MASSACHUSETTS AVE NW STE 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 ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2023

Transaction ID : SA11C.774799

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. UNITED PARCEL SERVICE INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 55 GLENLAKE PKWY

City ATLANTA	State GA	Zip Code 30328-3474
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00064766

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
06 / 30 / 2023

Transaction ID : SA11C.774800

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. VALUE IN ELECTING WOMEN PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 PENNSYLVANIA AVE NW STE 800

City WASHINGTON	State DC	Zip Code 20004-2401
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00327189

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
06 / 30 / 2023

Transaction ID : SA11C.781488

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	64500.00

**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 71 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. TEAM ELISE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
FEC ID number of contributing federal political committee. C C00830679		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 16447.60

Date of Receipt
MM / DD / YYYY
03 / 16 / 2023
Transaction ID : SA12.718562

Amount of Each Receipt this Period
3961.64

Memo Item
TRANSFER

B. SILVERMAN, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9349 COLLINS AVE APT 601

City SURFSIDE	State FL	Zip Code 33154-2697
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2023
Transaction ID : SA.712417.24.TE01

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. ELISE VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
FEC ID number of contributing federal political committee. C C00630632		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 110749.57

Date of Receipt
MM / DD / YYYY
03 / 27 / 2023
Transaction ID : SA12.721801

Amount of Each Receipt this Period
25863.61

Memo Item
TRANSFER

SUBTOTAL of Receipts This Page (optional).....	29825.25
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 72 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **02 / 27 / 2023**
Transaction ID : SA.710230.3.0029
 Amount of Each Receipt this Period 4975.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. CARRION, JOSE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 CALLE CERVANTES
 City SAN JUAN State PR Zip Code 00907-1962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSAGE LLC Occupation (for Individual) CONSULTING
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3400.00

Date of Receipt **03 / 25 / 2023**
Transaction ID : SA.721771.3.0029
 Amount of Each Receipt this Period 3400.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. D'AMBRA, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4290 FILER COVE RD
 City BIG TORCH KEY State FL Zip Code 33042-5907
 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 ▼ 5000.00

Date of Receipt **02 / 23 / 2023**
Transaction ID : SA.709906.3.0029
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. D'AMBRA, THOMAS, E., , PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4290 FILER COVE RD
 City BIG TORCH KEY State FL Zip Code 33042-5907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHARMAPOTHECA Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 23 / 2023**
Transaction ID : SA.709905.3.0029
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. DEJONG, CHERI, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1906 CHEYENNE TRL
 City DALHART State TX Zip Code 79022-5226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGRIVISION FARM MANAGEMENT Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 01 / 2023**
Transaction ID : SA.701637.3.0029
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. GROSS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 WEST DR.
 City MELBOURNE State FL Zip Code 32904-1060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 15 / 2023**
Transaction ID : SA.707599.3.0029
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 74 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. PECK, JOHN, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5940 WATSON AVE
 City DALLAS State TX Zip Code 75225-1651
 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 ▼ 5000.00

Date of Receipt 03 / 03 / 2023
Transaction ID : SA.712790.3.0029
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. RADGOWSKI, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 BAYVIEW AVE
 City NORTHPORT State NY Zip Code 11768-1505
 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 ▼ 5000.00

Date of Receipt 03 / 22 / 2023
Transaction ID : SA.721399.3.0029
 Amount of Each Receipt this Period 807.50
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. SCHUMACHER, AMANDA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 CLARENDON AVE
 City PALM BEACH State FL Zip Code 33480-4905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TREE OF LIFE FOUNDATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3400.00

Date of Receipt 02 / 10 / 2023
Transaction ID : SA.705106.3.0029
 Amount of Each Receipt this Period 3400.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. ELISE VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00630632

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110749.57

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2023
Transaction ID : SA12.730076

Amount of Each Receipt this Period
36415.16

Memo Item
TRANSFER

B. ARCHER, LYNNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 SAINT PETERS WALK

City SUGAR LAND	State TX	Zip Code 77479-2525
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
ARCHER AUTO GROUP SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2023
Transaction ID : SA.710230.3.0030

Amount of Each Receipt this Period
- 4975.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

C. BRENNAN, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 681 WYCKOFF AVE

City MAHWAH	State NJ	Zip Code 07430-3016
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2023
Transaction ID : SA.725860.3.0030

Amount of Each Receipt this Period
3400.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	36415.16
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 76 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. BURKE, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 MADISON AVE PH A
 City NEW YORK State NY Zip Code 10016-7011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS POLK Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **03 / 29 / 2023**
Transaction ID : SA.725759.3.0030
 Amount of Each Receipt this Period 700.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. CASSIDY, ALBERT, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 ELOISE LOOP RD
 City WINTER HAVEN State FL Zip Code 33884-2850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASSIDY HOLDINGS Occupation (for Individual) INVESTMENT REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 31 / 2023**
Transaction ID : SA.726307.3.0030
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. CHRISTY, KATHERINE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1942 BRIDGEWATER DR.
 City HEATHROW State FL Zip Code 32746-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLORIDA CAPITAL REALTY Occupation (for Individual) REAL ESTATE PROFESSIONAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 27 / 2023**
Transaction ID : SA.721805.3.0030
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 77 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. DUART, CARLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 NORTON DR.
 City TALLAHASSEE State FL Zip Code 32308-5965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CDR MAGUIRE INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 30 / 2023
Transaction ID : SA.726182.3.0030
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. GOLDMAN, MARC, STANLEY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 8020
 City GARDEN CITY State NY Zip Code 11530-8020
 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 ▼ 5000.00

Date of Receipt 03 / 31 / 2023
Transaction ID : SA.726480.3.0030
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. MASSEY, MICHAEL, HOLT, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 MERRIMAC ST
 City BOSTON State MA Zip Code 02114-4728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) MH MASSEY & CO LLC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 27 / 2023
Transaction ID : SA.721889.3.0030
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 78 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. RADGOWSKI, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 BAYVIEW AVE
 City NORTHPORT State NY Zip Code 11768-1505
 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 ▼ 5000.00

Date of Receipt 03 / 22 / 2023
Transaction ID : SA.721399.3.0030
 Amount of Each Receipt this Period - 49.50
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. SCHOSTAK, ROBERT, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17800 N LAUREL PARK DR. STE 200C
 City LIVONIA State MI Zip Code 48152-3985
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHOSTAK BROTHERS & CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 29 / 2023
Transaction ID : SA.725776.3.0030
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. SELBY, C, THOMAS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1942 BRIDGEWATER DR.
 City HEATHROW State FL Zip Code 32746-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STINSON CARPETS INC Occupation (for Individual) DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 27 / 2023
Transaction ID : SA.721806.3.0030
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 79 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. VIDAL-DUART, TINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 NORTON DR.

City TALLAHASSEE	State FL	Zip Code 32308-5965
---------------------	-------------	------------------------

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

Name of Employer (for Individual) CDR HEALTHCARE	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2023

Transaction ID : SA.725811.3.0030

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

B. TEAM ELISE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00830679

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16447.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2023

Transaction ID : SA12.730097

Amount of Each Receipt this Period
4898.05

Memo Item
TRANSFER

C. ARCHER, LYNNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 SAINT PETERS WALK

City SUGAR LAND	State TX	Zip Code 77479-2525
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ARCHER AUTO GROUP	Occupation (for Individual) SECRETARY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2023

Transaction ID : SA.728478.24.TE02

Amount of Each Receipt this Period
637.50

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	4898.05
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 80 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **03 / 31 / 2023**
Transaction ID : SA.728479.24.TE02
 Amount of Each Receipt this Period 1000.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **03 / 31 / 2023**
Transaction ID : SA.728480.24.TE02
 Amount of Each Receipt this Period 1000.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **03 / 31 / 2023**
Transaction ID : SA.728481.24.TE02
 Amount of Each Receipt this Period 1000.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **03 / 31 / 2023**
Transaction ID : SA.729957.24.TE02
 Amount of Each Receipt this Period 837.50
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. RADGOWSKI, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 BAYVIEW AVE
 City NORTHPORT State NY Zip Code 11768-1505
 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 ▼ 5000.00

Date of Receipt **03 / 21 / 2023**
Transaction ID : SA.721225.24.TE02
 Amount of Each Receipt this Period 3192.50
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. RADGOWSKI, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 BAYVIEW AVE
 City NORTHPORT State NY Zip Code 11768-1505
 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 ▼ 5000.00

Date of Receipt **03 / 28 / 2023**
Transaction ID : SA.725264.24.TE02
 Amount of Each Receipt this Period 49.50
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. ELISE VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
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FEC ID number of contributing federal political committee. **C** C00630632

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110749.57

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 15 / 2023
Transaction ID : SA12.764927

Amount of Each Receipt this Period
23264.39

Memo Item
TRANSFER

B. BRYDEN, ELIZABETH, MDT., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 W 67TH ST

City NEW YORK	State NY	Zip Code 10023-6200
------------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 10 / 2023
Transaction ID : SA.730496.3.EV31

Amount of Each Receipt this Period
3300.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

C. CANNAVO, VITO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 64 WILLOW POND RD

City STATEN ISLAND	State NY	Zip Code 10304-1221
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
SULLIVAN PAPAIN LAWYER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 20 / 2023
Transaction ID : SA.737858.3.EV31

Amount of Each Receipt this Period
700.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	23264.39
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 83 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. HILL, VERNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 262 E MAIN ST
City MOORESTOWN State NJ Zip Code 08057-2931
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SITE DEVELOPMENT Occupation (for Individual) EXEC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 22 / 2023**
Transaction ID : SA.749310.3.EV31
Amount of Each Receipt this Period 4500.00
 Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

B. LAGANAS, ELIZA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2929 SHORE DR.
City MERRICK State NY Zip Code 11566-5224
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) THE LAW OFFICE OF ELIZA D. STAHL, PC Occupation (for Individual) LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3300.00

Date of Receipt **06 / 08 / 2023**
Transaction ID : SA.760597.3.EV31
Amount of Each Receipt this Period 3300.00
 Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

C. LOEB, JOHN, L., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 194 ANDERSON HILL RD
City PURCHASE State NY Zip Code 10577-2101
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 ▼ 5000.00

Date of Receipt **05 / 19 / 2023**
Transaction ID : SA.749269.3.EV31
Amount of Each Receipt this Period 3400.00
 Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 84 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. LOEB, JOHN, L., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 194 ANDERSON HILL RD
 City PURCHASE State NY Zip Code 10577-2101
 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 ▼ 5000.00

Date of Receipt 06 / 05 / 2023
Transaction ID : SA.756022.3.EV31
 Amount of Each Receipt this Period 1600.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. MCGRAW, HAROLD, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 HOLLOW TREE RIDGE RD
 City DARIEN State CT Zip Code 06820-2002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HWM3 VENTURES LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 09 / 2023
Transaction ID : SA.760767.3.EV31
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. PALADINO, CARL, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 282 POTTERS RD
 City BUFFALO State NY Zip Code 14220-2526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELLICOTT DEVELOPMENT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3400.00

Date of Receipt 04 / 13 / 2023
Transaction ID : SA.733938.3.EV31
 Amount of Each Receipt this Period 3400.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 85 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. SEMCER, FRANK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27603 RIVERBANK DR.
 City BONITA SPRINGS State FL Zip Code 34134-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICRO STAMPING CORP Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 06 / 14 / 2023
Transaction ID : SA.764795.3.EV31
 Amount of Each Receipt this Period 600.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. STENCEL, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 TAUGWONK RD
 City STONINGTON State CT Zip Code 06378-1802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2023
Transaction ID : SA.760445.3.EV31
 Amount of Each Receipt this Period 1000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. STENCEL, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 TAUGWONK RD
 City STONINGTON State CT Zip Code 06378-1802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 08 / 2023
Transaction ID : SA.760601.3.EV31
 Amount of Each Receipt this Period 4000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 86 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. T, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10455 STRAIT LN

City DALLAS	State TX	Zip Code 75229-6537
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INVESTMENTS
---	--

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
04	/	24	/	2023

Transaction ID : SA.737993.3.EV31

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

B. TEAM ELISE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
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FEC ID number of contributing federal political committee. **C** C00830679

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16447.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2023

Transaction ID : SA12.764821

Amount of Each Receipt this Period
4217.81

Memo Item
TRANSFER

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2023

Transaction ID : SA.751928.24.TE03

Amount of Each Receipt this Period
3.23

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	4217.81
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 87 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 05 / 23 / 2023 Transaction ID : SA.752203.24.TE03
Mailing Address 4101 PEBBLE CREEK DR.		Amount of Each Receipt this Period 100.00
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 05 / 30 / 2023 Transaction ID : SA.753828.24.TE03
Mailing Address 4101 PEBBLE CREEK DR.		Amount of Each Receipt this Period 2.00
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 05 / 30 / 2023 Transaction ID : SA.753829.24.TE03
Mailing Address 4101 PEBBLE CREEK DR.		Amount of Each Receipt this Period 2.00
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 88 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2023

Transaction ID : SA.754452.24.TE03

Amount of Each Receipt this Period
6.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2023

Transaction ID : SA.754922.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2023

Transaction ID : SA.754929.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 89 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2023

Transaction ID : SA.754932.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2023

Transaction ID : SA.754933.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2023

Transaction ID : SA.754939.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 90 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023

Transaction ID : SA.755245.24.TE03

Amount of Each Receipt this Period
25.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023

Transaction ID : SA.755246.24.TE03

Amount of Each Receipt this Period
25.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023

Transaction ID : SA.755617.24.TE03

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 06 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.757373.24.TE03
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.50
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 06 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.758210.24.TE03
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 06 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.758611.24.TE03
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 92 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023

Transaction ID : SA.758790.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023

Transaction ID : SA.758851.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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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
 06 / 06 / 2023

Transaction ID : SA.758853.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 93 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2023

Transaction ID : SA.758854.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2023

Transaction ID : SA.758855.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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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
06	/	06	/	2023

Transaction ID : SA.758856.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 94 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2023

Transaction ID : SA.758980.24.TE03

Amount of Each Receipt this Period
15.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2023

Transaction ID : SA.758981.24.TE03

Amount of Each Receipt this Period
15.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2023

Transaction ID : SA.759063.24.TE03

Amount of Each Receipt this Period
19.80

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 95 OF 266
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12 13 14 15 16 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)
E-PAC

A. JAHNS, RICHARD, , ,
Mailing Address 4101 PEBBLE CREEK DR.
City EULESS State TX Zip Code 76040-5951
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 5000.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA.759348.24.TE03
Amount of Each Receipt this Period 33.00
Memo Item TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Mailing Address 4101 PEBBLE CREEK DR.
City EULESS State TX Zip Code 76040-5951
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 5000.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA.759420.24.TE03
Amount of Each Receipt this Period 34.65
Memo Item TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Mailing Address 4101 PEBBLE CREEK DR.
City EULESS State TX Zip Code 76040-5951
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 5000.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA.759661.24.TE03
Amount of Each Receipt this Period 35.00
Memo Item TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional) 0.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2023

Transaction ID : SA.759691.24.TE03

Amount of Each Receipt this Period
42.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2023

Transaction ID : SA.759692.24.TE03

Amount of Each Receipt this Period
42.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2023

Transaction ID : SA.759818.24.TE03

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 97 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 06 / 2023
Transaction ID : SA.759822.24.TE03
 Amount of Each Receipt this Period 50.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 13 / 2023
Transaction ID : SA.762038.24.TE03
 Amount of Each Receipt this Period 2.50
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 13 / 2023
Transaction ID : SA.762039.24.TE03
 Amount of Each Receipt this Period 2.50
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 98 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2023

Transaction ID : SA.762194.24.TE03

Amount of Each Receipt this Period
4.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2023

Transaction ID : SA.762604.24.TE03

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2023

Transaction ID : SA.762631.24.TE03

Amount of Each Receipt this Period
7.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.762648.24.TE03
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.763092.24.TE03
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.763093.24.TE03
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 100 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763094.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763095.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763096.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 101 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 13 / 2023**
Transaction ID : SA.763199.24.TE03
 Amount of Each Receipt this Period 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 13 / 2023**
Transaction ID : SA.763200.24.TE03
 Amount of Each Receipt this Period 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 13 / 2023**
Transaction ID : SA.763201.24.TE03
 Amount of Each Receipt this Period 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 102 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2023

Transaction ID : SA.763202.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2023

Transaction ID : SA.763203.24.TE03

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2023

Transaction ID : SA.763375.24.TE03

Amount of Each Receipt this Period
20.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 103 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763376.24.TE03

Amount of Each Receipt this Period
20.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763377.24.TE03

Amount of Each Receipt this Period
20.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763435.24.TE03

Amount of Each Receipt this Period
24.75

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 104 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763621.24.TE03

Amount of Each Receipt this Period
34.65

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763814.24.TE03

Amount of Each Receipt this Period
35.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763815.24.TE03

Amount of Each Receipt this Period
35.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 105 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763883.24.TE03

Amount of Each Receipt this Period
47.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.763994.24.TE03

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2023

Transaction ID : SA.764000.24.TE03

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 106 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 13 / 2023**
Transaction ID : SA.764020.24.TE03
 Amount of Each Receipt this Period 50.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WALTER, VIRGINIA, LANGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10606 ROSEMONT CT
 City FORT MYERS State FL Zip Code 33908-2840
 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 ▼ 0.00

Date of Receipt **05 / 02 / 2023**
Transaction ID : SA.742304.24.TE03
 Amount of Each Receipt this Period 4006.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt **04 / 11 / 2023**
Transaction ID : SA.733064.24.TE03
 Amount of Each Receipt this Period 11.90
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 107 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2023
Transaction ID : SA.733072.24.TE03
 Amount of Each Receipt this Period 25.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2023
Transaction ID : SA.733086.24.TE03
 Amount of Each Receipt this Period 25.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2023
Transaction ID : SA.736776.24.TE03
 Amount of Each Receipt this Period 14.85
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 108 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2023
Transaction ID : SA.736804.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2023
Transaction ID : SA.736805.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2023
Transaction ID : SA.736807.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 04 / 18 / 2023
Transaction ID : SA.736910.24.TE03

Amount of Each Receipt this Period 24.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 04 / 18 / 2023
Transaction ID : SA.736970.24.TE03

Amount of Each Receipt this Period 25.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 04 / 25 / 2023
Transaction ID : SA.738604.24.TE03

Amount of Each Receipt this Period 3.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 110 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.738609.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.738610.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.738621.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 111 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.738643.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.739245.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.739246.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 112 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
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A. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.739250.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.739257.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.739261.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 113 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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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A. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2023
Transaction ID : SA.739351.24.TE03
 Amount of Each Receipt this Period
 25.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2023
Transaction ID : SA.741247.24.TE03
 Amount of Each Receipt this Period
 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2023
Transaction ID : SA.741913.24.TE03
 Amount of Each Receipt this Period
 19.80
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 114 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2023
Transaction ID : SA.743720.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2023
Transaction ID : SA.744735.24.TE03
 Amount of Each Receipt this Period 25.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2023
Transaction ID : SA.746714.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 115 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 05 / 16 / 2023
Transaction ID : SA.746776.24.TE03

Amount of Each Receipt this Period 3.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 05 / 16 / 2023
Transaction ID : SA.747848.24.TE03

Amount of Each Receipt this Period 12.75

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 05 / 16 / 2023
Transaction ID : SA.747917.24.TE03

Amount of Each Receipt this Period 15.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 116 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.753904.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.753929.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.753935.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 117 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt
05 / 30 / 2023
Transaction ID : SA.753954.24.TE03

Amount of Each Receipt this Period
3.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt
05 / 30 / 2023
Transaction ID : SA.753982.24.TE03

Amount of Each Receipt this Period
3.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt
05 / 30 / 2023
Transaction ID : SA.753983.24.TE03

Amount of Each Receipt this Period
3.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 118 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.754993.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.754995.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.754998.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 119 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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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A. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.755004.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.755006.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2023
Transaction ID : SA.755167.24.TE03
 Amount of Each Receipt this Period 25.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 120 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.757460.24.TE03
 Amount of Each Receipt this Period
 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.757461.24.TE03
 Amount of Each Receipt this Period
 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.757494.24.TE03
 Amount of Each Receipt this Period
 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 121 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.757500.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.757526.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.757542.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.757543.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.757544.24.TE03
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.758895.24.TE03
 Amount of Each Receipt this Period 14.85
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 123 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.758936.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.758945.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.758948.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 124 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.758960.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.758971.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.758972.24.TE03
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
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 125 OF 266	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.759089.24.TE03
 Amount of Each Receipt this Period
 20.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.759267.24.TE03
 Amount of Each Receipt this Period
 25.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2023
Transaction ID : SA.759286.24.TE03
 Amount of Each Receipt this Period
 25.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 126 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1363**

City **KAPAAU** State **HI** Zip Code **96755-1363**

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 ▼ **984.10**

Date of Receipt **06 / 13 / 2023**
Transaction ID : **SA.763249.24.TE03**

Amount of Each Receipt this Period **14.85**

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. ELISE VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **P.O. BOX 500**

City **GLENS FALLS** State **NY** Zip Code **12801-0500**

FEC ID number of contributing federal political committee. **C** **C00630632**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **110749.57**

Date of Receipt **06 / 30 / 2023**
Transaction ID : **SA12.781483**

Amount of Each Receipt this Period **25206.41**

Memo Item
TRANSFER

C. BRUDERMAN, MATTHEW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **64 BIRCH HILL ROAD**

City **LOCUST VALLEY** State **NY** Zip Code **11560-1834**

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 ▼ **5000.00**

Date of Receipt **06 / 29 / 2023**
Transaction ID : **SA.774516.3.EV32**

Amount of Each Receipt this Period **5000.00**

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	25206.41
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 127 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. BRYDEN, ELIZABETH, MDT., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 W 67TH ST

City NEW YORK State NY Zip Code 10023-6200

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 ▼ 5000.00

Date of Receipt **04 / 10 / 2023**

Transaction ID : SA.730496.3.EV32

Amount of Each Receipt this Period - 3200.00

Memo Item
TRANSFER

TRANSFER FROM ELISE VICTORY FUND

B. CANNAMO, VITO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 64 WILLOW POND RD

City STATEN ISLAND State NY Zip Code 10304-1221

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

Name of Employer (for Individual) SULLIVAN PAPAIN Occupation (for Individual) LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **06 / 30 / 2023**

Transaction ID : SA.774801.3.EV32

Amount of Each Receipt this Period 2000.00

Memo Item
TRANSFER

TRANSFER FROM ELISE VICTORY FUND

C. CASSIDY, GLORIA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1901 ELOISE LOOP RD

City WINTER HAVEN State FL Zip Code 33884-2850

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 ▼ 3400.00

Date of Receipt **06 / 29 / 2023**

Transaction ID : SA.774557.3.EV32

Amount of Each Receipt this Period 3400.00

Memo Item
TRANSFER

TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 128 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. FIELER, SEAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 HASLET AVE

City PRINCETON	State NJ	Zip Code 08540-4914
-------------------	-------------	------------------------

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

Name of Employer (for Individual) EQUINOX ASSET MANAGEMENT	Occupation (for Individual) MONEY MANAGEMENT
---	---

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
06	/	22	/	2023

Transaction ID : SA.769695.3.EV32

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

B. HERMAN, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 AVENUE OF TWO RIVERS S

City RUMSON	State NJ	Zip Code 07760-1812
----------------	-------------	------------------------

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

Name of Employer (for Individual) WHITE PINE CAPITAL MANAGEMENT	Occupation (for Individual) FINANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2023

Transaction ID : SA.774498.3.EV32

Amount of Each Receipt this Period
4200.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

C. KUHN, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2400 KATHY COVE

City AUSTIN	State TX	Zip Code 78704-4630
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2023

Transaction ID : SA.769621.3.EV32

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 129 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. NORBER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1147 BROADWAY
 City NEW YORK State NY Zip Code 10001-7521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIONS DEN ENTERPRISES Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.769175.3.EV32
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. RAPHAEL, IRVING, G., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7301 DARTMOOR XING
 City FAYETTEVILLE State NY Zip Code 13066-2477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2023
Transaction ID : SA.774834.3.EV32
 Amount of Each Receipt this Period 1000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. VALLEE, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 BRAYS ISLAND DR.
 City SHELDON State SC Zip Code 29941-3004
 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 ▼ 5000.00

Date of Receipt 06 / 29 / 2023
Transaction ID : SA.778164.3.EV32
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 130 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. VALLEE, RODOLPHE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61 BRAYS ISLAND DR.

City SHELDON	State SC	Zip Code 29941-3004
-----------------	-------------	------------------------

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

Name of Employer (for Individual) POCOTALIGO TIMBER AND MANAGEMENT COMPA	Occupation (for Individual) BUSINESS
---	---

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
06	/	29	/	2023

Transaction ID : SA.778165.3.EV32

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

B. HOUSE GOP BATTLEGROUND FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00837492

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3758.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2023

Transaction ID : SA12.779136

Amount of Each Receipt this Period
3758.11

Memo Item
TRANSFER

C. BRYDEN, ELIZABETH, MDT., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 W 67TH ST

City NEW YORK	State NY	Zip Code 10023-6200
------------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2023

Transaction ID : SA.769863.31.BG01

Amount of Each Receipt this Period
4900.00

Memo Item
TRANSFER
TRANSFER FROM HOUSE BATTLEGROUND FUND

SUBTOTAL of Receipts This Page (optional).....	3758.11
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 131 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. TEAM ELISE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00830679

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16447.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA12.781486

Amount of Each Receipt this Period
3370.10

Memo Item
TRANSFER

B. BATMADIAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 215 NORTH FEDERAL HWY

City BOCA RATON	State FL	Zip Code 33432-3994
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
INVESTMENTS LIMITED PRESIDENT

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
06		30		2023

Transaction ID : SA.779992.24.TE04

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2023

Transaction ID : SA.766701.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	3370.10
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 132 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
E-PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.766731.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.766906.24.TE04

Amount of Each Receipt this Period
7.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.766953.24.TE04

Amount of Each Receipt this Period
9.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 133 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767001.24.TE04
 Amount of Each Receipt this Period
 9.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767405.24.TE04
 Amount of Each Receipt this Period
 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767413.24.TE04
 Amount of Each Receipt this Period
 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 134 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.767439.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.767440.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.767441.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 135 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767497.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767513.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767514.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 136 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767515.24.TE04
 Amount of Each Receipt this Period
 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767518.24.TE04
 Amount of Each Receipt this Period
 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767519.24.TE04
 Amount of Each Receipt this Period
 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 137 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : SA.767520.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : SA.767521.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : SA.767540.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 138 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767701.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767702.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767786.24.TE04

Amount of Each Receipt this Period
15.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 139 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767787.24.TE04
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767791.24.TE04
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767792.24.TE04
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 140 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767794.24.TE04

Amount of Each Receipt this Period
15.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767977.24.TE04

Amount of Each Receipt this Period
20.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.767978.24.TE04

Amount of Each Receipt this Period
20.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 141 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.768001.24.TE04
 Amount of Each Receipt this Period 20.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.768230.24.TE04
 Amount of Each Receipt this Period 30.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.768231.24.TE04
 Amount of Each Receipt this Period 30.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 142 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.768237.24.TE04

Amount of Each Receipt this Period
30.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.768631.24.TE04

Amount of Each Receipt this Period
35.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.768635.24.TE04

Amount of Each Receipt this Period
35.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 143 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : SA.768636.24.TE04
 Amount of Each Receipt this Period 35.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : SA.768654.24.TE04
 Amount of Each Receipt this Period 35.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : SA.768688.24.TE04
 Amount of Each Receipt this Period 35.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 144 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.768689.24.TE04

Amount of Each Receipt this Period
35.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.768698.24.TE04

Amount of Each Receipt this Period
35.70

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : SA.768704.24.TE04

Amount of Each Receipt this Period
40.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 145 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : SA.768705.24.TE04

Amount of Each Receipt this Period
40.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : SA.768707.24.TE04

Amount of Each Receipt this Period
40.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : SA.768722.24.TE04

Amount of Each Receipt this Period
49.50

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 146 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.768844.24.TE04
 Amount of Each Receipt this Period 49.50
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.768919.24.TE04
 Amount of Each Receipt this Period 50.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.768920.24.TE04
 Amount of Each Receipt this Period 50.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 147 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.768921.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.768923.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.768942.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 148 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.768952.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.769057.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 27 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.770191.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.35
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 149 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**
Transaction ID : SA.771053.24.TE04
 Amount of Each Receipt this Period 2.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**
Transaction ID : SA.771295.24.TE04
 Amount of Each Receipt this Period 4.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**
Transaction ID : SA.771318.24.TE04
 Amount of Each Receipt this Period 4.50
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 150 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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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
06	/	27	/	2023

Transaction ID : SA.771688.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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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
06	/	27	/	2023

Transaction ID : SA.771718.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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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
06	/	27	/	2023

Transaction ID : SA.771719.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 151 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.771720.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.771851.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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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
06	/	27	/	2023

Transaction ID : SA.771920.24.TE04

Amount of Each Receipt this Period
9.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 152 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.771945.24.TE04

Amount of Each Receipt this Period 9.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.772326.24.TE04

Amount of Each Receipt this Period 10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.772327.24.TE04

Amount of Each Receipt this Period 10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 153 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772328.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772329.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772330.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 154 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.772331.24.TE04

Amount of Each Receipt this Period 10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.772361.24.TE04

Amount of Each Receipt this Period 10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼ 5000.00

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.772362.24.TE04

Amount of Each Receipt this Period 10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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 155 OF 266
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
E-PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼
5000.00

Date of Receipt
06 / 27 / 2023
Transaction ID : SA.772363.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼
5000.00

Date of Receipt
06 / 27 / 2023
Transaction ID : SA.772364.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS State TX Zip Code 76040-5951

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 ▼
5000.00

Date of Receipt
06 / 27 / 2023
Transaction ID : SA.772365.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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 156 OF 266
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA.772366.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA.772367.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA.772504.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 157 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772505.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772519.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772520.24.TE04

Amount of Each Receipt this Period
10.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 158 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023
Transaction ID : SA.772521.24.TE04
 Amount of Each Receipt this Period 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023
Transaction ID : SA.772522.24.TE04
 Amount of Each Receipt this Period 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023
Transaction ID : SA.772597.24.TE04
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 159 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772598.24.TE04

Amount of Each Receipt this Period
15.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772599.24.TE04

Amount of Each Receipt this Period
15.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.772604.24.TE04

Amount of Each Receipt this Period
15.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 160 OF 266
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12 13 14 15 16 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)
E-PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,
Mailing Address 4101 PEBBLE CREEK DR.
City EULESS State TX Zip Code 76040-5951
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 5000.00

Date of Receipt 06 / 27 / 2023
Transaction ID : SA.772733.24.TE04
Amount of Each Receipt this Period 20.00
Memo Item TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,
Mailing Address 4101 PEBBLE CREEK DR.
City EULESS State TX Zip Code 76040-5951
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 5000.00

Date of Receipt 06 / 27 / 2023
Transaction ID : SA.772734.24.TE04
Amount of Each Receipt this Period 20.00
Memo Item TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,
Mailing Address 4101 PEBBLE CREEK DR.
City EULESS State TX Zip Code 76040-5951
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 5000.00

Date of Receipt 06 / 27 / 2023
Transaction ID : SA.772744.24.TE04
Amount of Each Receipt this Period 20.00
Memo Item TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional) 0.00
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 161 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA.772751.24.TE04

Amount of Each Receipt this Period
20.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA.772893.24.TE04

Amount of Each Receipt this Period
25.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023

Transaction ID : SA.772932.24.TE04

Amount of Each Receipt this Period
30.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 162 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 27 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.772933.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 27 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.772939.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 27 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.773059.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.65
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 163 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773146.24.TE04

Amount of Each Receipt this Period
34.65

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773189.24.TE04

Amount of Each Receipt this Period
35.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773221.24.TE04

Amount of Each Receipt this Period
35.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 164 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2023

Transaction ID : SA.773249.24.TE04

Amount of Each Receipt this Period
40.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2023

Transaction ID : SA.773250.24.TE04

Amount of Each Receipt this Period
40.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2023

Transaction ID : SA.773251.24.TE04

Amount of Each Receipt this Period
41.58

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 165 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773387.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773388.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773389.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 166 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773394.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773402.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2023

Transaction ID : SA.773410.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 167 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.775367.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.776556.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.776557.24.TE04

Amount of Each Receipt this Period
5.00

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 168 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.777085.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.777087.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.777089.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 169 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.			Transaction ID : SA.777223.24.TE04
City EULESS	State TX	Zip Code 76040-5951	Amount of Each Receipt this Period 12.50
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	TRANSFER FROM TEAM ELISE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.			Transaction ID : SA.777350.24.TE04
City EULESS	State TX	Zip Code 76040-5951	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	TRANSFER FROM TEAM ELISE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.			Transaction ID : SA.777357.24.TE04
City EULESS	State TX	Zip Code 76040-5951	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	TRANSFER FROM TEAM ELISE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 170 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 30 / 2023**
Transaction ID : SA.777358.24.TE04
 Amount of Each Receipt this Period 15.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 30 / 2023**
Transaction ID : SA.777475.24.TE04
 Amount of Each Receipt this Period 22.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt **06 / 30 / 2023**
Transaction ID : SA.777546.24.TE04
 Amount of Each Receipt this Period 25.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 171 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.777669.24.TE04

Amount of Each Receipt this Period
30.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.777696.24.TE04

Amount of Each Receipt this Period
34.65

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.777848.24.TE04

Amount of Each Receipt this Period
40.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 172 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.777849.24.TE04

Amount of Each Receipt this Period
40.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.777850.24.TE04

Amount of Each Receipt this Period
42.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. JAHNS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : SA.777851.24.TE04

Amount of Each Receipt this Period
42.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 173 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JAHNS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.777863.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAHNS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.777929.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JAHNS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2023
Mailing Address 4101 PEBBLE CREEK DR.		Transaction ID : SA.777943.24.TE04
City EULESS	State TX	Zip Code 76040-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 174 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2023

Transaction ID : SA.777950.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2023

Transaction ID : SA.777963.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAHNS, RICHARD, , ,

Mailing Address 4101 PEBBLE CREEK DR.

City EULESS	State TX	Zip Code 76040-5951
----------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2023

Transaction ID : SA.779949.24.TE04

Amount of Each Receipt this Period
50.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 175 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
E-PAC

A. JAHNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 PEBBLE CREEK DR.
 City EULESS State TX Zip Code 76040-5951
 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 ▼ 5000.00

Date of Receipt 06 / 30 / 2023
Transaction ID : SA.781149.24.TE04
 Amount of Each Receipt this Period 42.84
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. SEMCER, FRANK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27603 RIVERBANK DR.
 City BONITA SPRINGS State FL Zip Code 34134-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICRO STAMPING CORP Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.767466.24.TE04
 Amount of Each Receipt this Period 10.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WALTER, VIRGINIA, LANGE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10606 ROSEMONT CT
 City FORT MYERS State FL Zip Code 33908-2840
 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 ▼ 0.00

Date of Receipt 05 / 02 / 2023
Transaction ID : SA.769104.24.TE04
 Amount of Each Receipt this Period - 4006.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 176 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WENTHE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 1ST ST E
City ALTOONA State IA Zip Code 50009-1806
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 ▼ 114.30

Date of Receipt 06 / 20 / 2023
Transaction ID : SA.768663.24.TE04
Amount of Each Receipt this Period 35.00
 Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. WENTHE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 1ST ST E
City ALTOONA State IA Zip Code 50009-1806
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 ▼ 114.30

Date of Receipt 06 / 30 / 2023
Transaction ID : SA.777699.24.TE04
Amount of Each Receipt this Period 34.65
 Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. WENTHE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 1ST ST E
City ALTOONA State IA Zip Code 50009-1806
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 ▼ 114.30

Date of Receipt 06 / 30 / 2023
Transaction ID : SA.777703.24.TE04
Amount of Each Receipt this Period 34.65
 Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 177 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023
Transaction ID : SA.767622.24.TE04
 Amount of Each Receipt this Period
 14.85
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023
Transaction ID : SA.771243.24.TE04
 Amount of Each Receipt this Period
 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2023
Transaction ID : SA.772574.24.TE04
 Amount of Each Receipt this Period
 14.85
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 178 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.772576.24.TE04

Amount of Each Receipt this Period 14.85

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.772580.24.TE04

Amount of Each Receipt this Period 14.85

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt **06 / 27 / 2023**

Transaction ID : SA.772639.24.TE04

Amount of Each Receipt this Period 19.80

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 179 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 06 / 30 / 2023
Transaction ID : SA.776154.24.TE04

Amount of Each Receipt this Period 3.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 06 / 30 / 2023
Transaction ID : SA.776157.24.TE04

Amount of Each Receipt this Period 3.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1363

City KAPAAU State HI Zip Code 96755-1363

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 ▼ 984.10

Date of Receipt 06 / 30 / 2023
Transaction ID : SA.776183.24.TE04

Amount of Each Receipt this Period 3.00

Memo Item
TRANSFER
TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶ 0.00

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 180 OF 266	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1363**

City KAPAAU	State HI	Zip Code 96755-1363
-----------------------	--------------------	-------------------------------

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 ▼
984.10

Date of Receipt
06 / 30 / 2023

Transaction ID : SA.777290.24.TE04

Amount of Each Receipt this Period
13.50

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1363**

City KAPAAU	State HI	Zip Code 96755-1363
-----------------------	--------------------	-------------------------------

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 ▼
984.10

Date of Receipt
06 / 30 / 2023

Transaction ID : SA.777303.24.TE04

Amount of Each Receipt this Period
14.85

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1363**

City KAPAAU	State HI	Zip Code 96755-1363
-----------------------	--------------------	-------------------------------

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 ▼
984.10

Date of Receipt
06 / 30 / 2023

Transaction ID : SA.777313.24.TE04

Amount of Each Receipt this Period
14.85

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 181 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt **06 / 30 / 2023**
Transaction ID : SA.779389.24.TE04
 Amount of Each Receipt this Period 3.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

B. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt **06 / 30 / 2023**
Transaction ID : SA.779699.24.TE04
 Amount of Each Receipt this Period 14.85
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

C. WIPPERMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1363
 City KAPAAU State HI Zip Code 96755-1363
 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 ▼ 984.10

Date of Receipt **06 / 30 / 2023**
Transaction ID : SA.779700.24.TE04
 Amount of Each Receipt this Period 14.85
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 182 OF 266
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WIPPERMAN, LARRY, , ,

Mailing Address **PO BOX 1363**

City **KAPAAU** State **HI** Zip Code **96755-1363**

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 ▼ **984.10**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2023

Transaction ID : SA.779717.24.TE04

Amount of Each Receipt this Period
 _____ **15.00**

Memo Item
TRANSFER

TRANSFER FROM TEAM ELISE

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	130955.28

**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		Date of Disbursement MM / DD / YYYY 01 / 03 / 2023
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : SB.5855 Amount of Each Disbursement this Period 24.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement WEB SERVICE		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. RED SPARK STRATEGY		Date of Disbursement MM / DD / YYYY 01 / 03 / 2023
Mailing Address PO BOX 1269		FEC Identification Number C [REDACTED] Transaction ID : SB.5723 Amount of Each Disbursement this Period 2499.12
City ANNANDALE	State VA	Zip Code 22003
Purpose of Disbursement DIGITAL 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) C. ZOOM		Date of Disbursement MM / DD / YYYY 01 / 03 / 2023
Mailing Address 55 ALMADEN BLVD SUITE 600		FEC Identification Number C [REDACTED] Transaction ID : SB.5861 Amount of Each Disbursement this Period 15.74
City SAN JOSE	State CA	Zip Code 95113
Purpose of Disbursement WEB SERVICE		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	

SUBTOTAL of Disbursements This Page (optional).....▶	2538.86
TOTAL 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

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

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

Mailing Address **79 POTOMAC AVE SE #606**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2023

FEC Identification Number

C

Transaction ID : **SB.5730**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. RENNA, RAYCHEL, , ,

Mailing Address **333 8TH STREET SE APT 410**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2023

FEC Identification Number

C

Transaction ID : **SB.5771**

Amount of Each Disbursement this Period

1750.00

Memo Item

Full Name (Last, First, Middle Initial)
C. GRV STRATEGIES LLC

Mailing Address **731 SEATON AVENUE UNIT 309**

City **ALEXANDRIA** State **VA** Zip Code **22305**

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2023

FEC Identification Number

C

Transaction ID : **SB.5764**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

3750.00

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)
E-PAC

Full Name (Last, First, Middle Initial)
A. CMDI

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB.5716

Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. USPS

Mailing Address 16 HUDSON AVENUE

City GLENS FALLS State NY Zip Code 12801

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB.5778

Amount of Each Disbursement this Period: 60.00

Memo Item

Full Name (Last, First, Middle Initial)
C. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB.5690

Amount of Each Disbursement this Period: 2.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 312.44

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. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB.5801

Amount of Each Disbursement this Period: 269.90

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB.5802

Amount of Each Disbursement this Period: 488.80

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB.5803

Amount of Each Disbursement this Period: 444.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1203.50

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) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 12 / 2023	
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB.5804 Amount of Each Disbursement this Period [] 444.80	
City FT WORTH	State TX	Zip Code 76155	Category/ Type []
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) ▼		
State: [] District: []	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 12 / 2023	
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB.5805 Amount of Each Disbursement this Period [] 444.80	
City FT WORTH	State TX	Zip Code 76155	Category/ Type []
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) ▼		
State: [] District: []	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 13 / 2023	
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB.5806 Amount of Each Disbursement this Period [] 37.49	
City FT WORTH	State TX	Zip Code 76155	Category/ Type []
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) ▼		
State: [] District: []	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 927.09
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. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2023

FEC Identification Number: C

Transaction ID : SB.5807

Amount of Each Disbursement this Period: 338.91

Memo Item

B. 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: 01 / 17 / 2023

FEC Identification Number: C

Transaction ID : SB.5691

Amount of Each Disbursement this Period: 100.02

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: 01 / 18 / 2023

FEC Identification Number: C

Transaction ID : SB.5734

Amount of Each Disbursement this Period: 70.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 508.93

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) A. AMAZON		Date of Disbursement MM / DD / YYYY 01 / 20 / 2023
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	
Purpose of Disbursement OFFICE SUPPLIES		Transaction ID : SB.5756
Candidate Name		Amount of Each Disbursement this Period 48.74
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AMAZON		Date of Disbursement MM / DD / YYYY 01 / 23 / 2023
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	
Purpose of Disbursement OFFICE SUPPLIES		Transaction ID : SB.5757
Candidate Name		Amount of Each Disbursement this Period 16.46
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. RED SPARK STRATEGY		Date of Disbursement MM / DD / YYYY 01 / 23 / 2023
Mailing Address PO BOX 1269		FEC Identification Number C
City ANNANDALE	State VA	
Purpose of Disbursement DIGITAL CONSULTING		Transaction ID : SB.5724
Candidate Name		Amount of Each Disbursement this Period 2096.91
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

2162.11

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)

A. TRUIST

Mailing Address 2200 WILSON BLVD SUITE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2023

FEC Identification Number

C

Transaction ID : SB.5678

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET STREET SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2023

FEC Identification Number

C

Transaction ID : SB.5853

Amount of Each Disbursement this Period

39.96

Memo Item

Full Name (Last, First, Middle Initial)

C. COMPLIANCE CONSULTING CO OF VIRGINIA LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2023

FEC Identification Number

C

Transaction ID : SB.5685

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)..... ▶

1054.96

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: 01 / 25 / 2023

FEC Identification Number: C

Transaction ID : SB.5731

Amount of Each Disbursement this Period: 9650.00

Memo Item

B. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 26 / 2023

FEC Identification Number: C

Transaction ID : SB.5758

Amount of Each Disbursement this Period: 150.60

Memo Item

C. INTUIT

Full Name (Last, First, Middle Initial)

Mailing Address 2700 COAST AVE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 26 / 2023

FEC Identification Number: C

Transaction ID : SB.5781

Amount of Each Disbursement this Period: 55.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9855.60

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

Full Name (Last, First, Middle Initial) A. WILEY REIN LLP		Date of Disbursement MM / DD / YYYY 01 / 27 / 2023
Mailing Address PO BOX 800		FEC Identification Number C
City NEWARK	State NJ	
Purpose of Disbursement LEGAL CONSULTING		Transaction ID : SB.5752
Candidate Name		Amount of Each Disbursement this Period 3000.00
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. ALBANY COUNTY AIRPORT		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 737 ALBANY SHAKER ROAD		FEC Identification Number C
City ALBANY	State NY	
Purpose of Disbursement PARKING		Transaction ID : SB.5760
Candidate Name		Amount of Each Disbursement this Period 70.00
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. ALLIANZ GLOBAL ASSISTANCE		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address PO BOX 71533		FEC Identification Number C
City RICHMOND	State VA	
Purpose of Disbursement TRAVEL		Transaction ID : SB.5787
Candidate Name		Amount of Each Disbursement this Period 26.25
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

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

3096.25

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)
A. ALLIANZ GLOBAL ASSISTANCE

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 30 / 2023

FEC Identification Number: C

Transaction ID : **SB.5788**

Amount of Each Disbursement this Period: 23.63

Memo Item

Full Name (Last, First, Middle Initial)
B. ALLIANZ GLOBAL ASSISTANCE

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 30 / 2023

FEC Identification Number: C

Transaction ID : **SB.5789**

Amount of Each Disbursement this Period: 26.25

Memo Item

Full Name (Last, First, Middle Initial)
C. ALLIANZ GLOBAL ASSISTANCE

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 30 / 2023

FEC Identification Number: C

Transaction ID : **SB.5790**

Amount of Each Disbursement this Period: 22.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 72.63

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)

A. ALLIANZ GLOBAL ASSISTANCE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2023

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

FEC Identification Number

C

Transaction ID : SB.5791

Amount of Each Disbursement this Period

19.85

Purpose of Disbursement TRAVEL

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. ALLIANZ GLOBAL ASSISTANCE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2023

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

FEC Identification Number

C

Transaction ID : SB.5792

Amount of Each Disbursement this Period

19.85

Purpose of Disbursement TRAVEL

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. ALLIANZ GLOBAL ASSISTANCE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2023

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

FEC Identification Number

C

Transaction ID : SB.5793

Amount of Each Disbursement this Period

26.25

Purpose of Disbursement TRAVEL

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

65.95

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) A. ALLIANZ GLOBAL ASSISTANCE		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address PO BOX 71533		FEC Identification Number C Transaction ID : SB.5794 Amount of Each Disbursement this Period 26.25
City RICHMOND	State VA	
Zip Code 23255	Purpose of Disbursement TRAVEL	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. ALLIANZ GLOBAL ASSISTANCE		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address PO BOX 71533		FEC Identification Number C Transaction ID : SB.5795 Amount of Each Disbursement this Period 26.25
City RICHMOND	State VA	
Zip Code 23255	Purpose of Disbursement TRAVEL	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) C. ALLIANZ GLOBAL ASSISTANCE		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address PO BOX 71533		FEC Identification Number C Transaction ID : SB.5796 Amount of Each Disbursement this Period 27.72
City RICHMOND	State VA	
Zip Code 23255	Purpose of Disbursement TRAVEL	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:		

SUBTOTAL of Disbursements This Page (optional).....▶	80.22
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. ALLIANZ GLOBAL ASSISTANCE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 71533

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	3

City
RICHMOND

State
VA

Zip Code
23255

FEC Identification Number

Purpose of Disbursement
TRAVEL

C

Candidate Name

Transaction ID : SB.5797

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

26.25

State: District:

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 4333 AMON CARTER BLVD

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	3

City
FT WORTH

State
TX

Zip Code
76155

FEC Identification Number

Purpose of Disbursement
TRAVEL

C

Candidate Name

Transaction ID : SB.5808

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

472.80

State: District:

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 4333 AMON CARTER BLVD

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	3

City
FT WORTH

State
TX

Zip Code
76155

FEC Identification Number

Purpose of Disbursement
TRAVEL

C

Candidate Name

Transaction ID : SB.5809

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

472.80

State: District:

Memo Item

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

971.85

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB.5810

Amount of Each Disbursement this Period: 708.90

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB.5811

Amount of Each Disbursement this Period: 708.90

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB.5812

Amount of Each Disbursement this Period: 342.81

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1760.61

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) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB.5813 Amount of Each Disbursement this Period [] 24.76
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB.5814 Amount of Each Disbursement this Period [] 236.80
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB.5815 Amount of Each Disbursement this Period [] 342.81
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 604.37
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) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023	
Mailing Address 4333 AMON CARTER BLVD			
City FT WORTH	State TX	Zip Code 76155	
Purpose of Disbursement TRAVEL		<input type="text"/>	
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:	<input type="checkbox"/> Memo Item		

FEC Identification Number
C

Transaction ID : SB.5816

Amount of Each Disbursement this Period
 113.90

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023	
Mailing Address 4333 AMON CARTER BLVD			
City FT WORTH	State TX	Zip Code 76155	
Purpose of Disbursement TRAVEL		<input type="text"/>	
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:	<input type="checkbox"/> Memo Item		

FEC Identification Number
C

Transaction ID : SB.5817

Amount of Each Disbursement this Period
 8.28

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023	
Mailing Address 4333 AMON CARTER BLVD			
City FT WORTH	State TX	Zip Code 76155	
Purpose of Disbursement TRAVEL		<input type="text"/>	
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:	<input type="checkbox"/> Memo Item		

FEC Identification Number
C

Transaction ID : SB.5818

Amount of Each Disbursement this Period
 83.90

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text"/> 206.08
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5819 Amount of Each Disbursement this Period [REDACTED] 299.81
City FT WORTH	State TX	Zip Code 76155
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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5820 Amount of Each Disbursement this Period [REDACTED] 342.81
City FT WORTH	State TX	Zip Code 76155
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) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5821 Amount of Each Disbursement this Period [REDACTED] 18.63
City FT WORTH	State TX	Zip Code 76155
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	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 661.25
TOTAL 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. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB.5822

Amount of Each Disbursement this Period: 278.80

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB.5823

Amount of Each Disbursement this Period: 18.21

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB.5824

Amount of Each Disbursement this Period: 187.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 484.81

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) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5825 Amount of Each Disbursement this Period 18.11
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5826 Amount of Each Disbursement this Period 257.80
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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) C. JETBLUE		Date of Disbursement MM / DD / YYYY 01 / 30 / 2023
Mailing Address 118-29 WUEENS BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5836 Amount of Each Disbursement this Period 143.90
City FOREST HILLS	State NY	Zip Code 11375
Purpose of Disbursement TRAVEL		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	

SUBTOTAL of Disbursements This Page (optional).....▶	419.81
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)

A. STAPLES

Mailing Address 3301 RICHMOND HWY

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2023

FEC Identification Number

C

Transaction ID : SB.5754

Amount of Each Disbursement this Period

74.18

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2023

FEC Identification Number

C

Transaction ID : SB.5827

Amount of Each Disbursement this Period

701.04

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2023

FEC Identification Number

C

Transaction ID : SB.5828

Amount of Each Disbursement this Period

708.90

Memo Item

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

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

1484.12

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. ZOOM

Mailing Address 55 ALMADEN BLVD SUITE 600

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2023

FEC Identification Number

C

Transaction ID : SB.5862

Amount of Each Disbursement this Period

15.74

Memo Item

Full Name (Last, First, Middle Initial)

B. ALLIANZ GLOBAL ASSISTANCE

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2023

FEC Identification Number

C

Transaction ID : SB.5798

Amount of Each Disbursement this Period

22.75

Memo Item

Full Name (Last, First, Middle Initial)

C. ALLIANZ GLOBAL ASSISTANCE

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2023

FEC Identification Number

C

Transaction ID : SB.5799

Amount of Each Disbursement this Period

28.90

Memo Item

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

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

67.39

**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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 01 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5829 Amount of Each Disbursement this Period 18.11
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 01 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5830 Amount of Each Disbursement this Period 298.80
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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) C. GRV STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 02 / 01 / 2023
Mailing Address 731 SEATON AVENUE UNIT 309		FEC Identification Number C [REDACTED] Transaction ID : SB.5765 Amount of Each Disbursement this Period 1000.00
City ALEXANDRIA	State VA	Zip Code 22305
Purpose of Disbursement POLITICAL STRATEGY 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	

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

1316.91

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) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 02 / 2023
Mailing Address 1020 CARGO SERVICE ROAD		FEC Identification Number C [] Transaction ID : SB.5835 Amount of Each Disbursement this Period [] 428.20
City ATLANTA	State GA	Zip Code 30337
Purpose of Disbursement TRAVEL	Category/Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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. FEDEX		Date of Disbursement MM / DD / YYYY 02 / 02 / 2023
Mailing Address 715 D STREET SE		FEC Identification Number C [] Transaction ID : SB.5779 Amount of Each Disbursement this Period [] 290.03
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement PRINTING	Category/Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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) C. GOOGLE		Date of Disbursement MM / DD / YYYY 02 / 02 / 2023
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [] Transaction ID : SB.5856 Amount of Each Disbursement this Period [] 24.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement WEB SERVICE	Category/Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 742.23
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) A. RENNA, RAYCHEL, , ,		Date of Disbursement MM / DD / YYYY 02 / 03 / 2023	
Mailing Address 333 8TH STREET SE APT 410		FEC Identification Number C [] Transaction ID : SB.5772 Amount of Each Disbursement this Period [] 2200.00	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type []
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. RENNA, RAYCHEL, , ,		Date of Disbursement MM / DD / YYYY 02 / 03 / 2023	
Mailing Address 333 8TH STREET SE APT 410		FEC Identification Number C [] Transaction ID : SB.5845 Amount of Each Disbursement this Period [] 57.00	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type []
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) C. CHICK-FIL-A		Date of Disbursement MM / DD / YYYY 02 / 06 / 2023	
Mailing Address 5200 BUFFINGTON RD		FEC Identification Number C [] Transaction ID : SB.5740 Amount of Each Disbursement this Period [] 464.19	
City ATLANTA	State GA	Zip Code 30349	Category/ Type []
Purpose of Disbursement FOOD/BEVERAGES		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2721.19
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. SOUTHWEST AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 07 / 2023

FEC Identification Number: C

Transaction ID : SB.5846

Amount of Each Disbursement this Period: 591.98

Memo Item

B. SOUTHWEST AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 07 / 2023

FEC Identification Number: C

Transaction ID : SB.5847

Amount of Each Disbursement this Period: 591.98

Memo Item

C. 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: 02 / 09 / 2023

FEC Identification Number: C

Transaction ID : SB.5717

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1433.96

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)

A. UPS STORE

Mailing Address 611 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
DELIVERY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2023

FEC Identification Number

C

Transaction ID : SB.5722

Amount of Each Disbursement this Period

14.90

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2023

FEC Identification Number

C

Transaction ID : SB.5692

Amount of Each Disbursement this Period

177.12

Memo Item

Full Name (Last, First, Middle Initial)

C. ALLIANZ GLOBAL ASSISTANCE

Mailing Address PO BOX 71533

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2023

FEC Identification Number

C

Transaction ID : SB.5800

Amount of Each Disbursement this Period

68.25

Memo Item

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

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

260.27

**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. RENNA, RAYCHEL, , ,		Date of Disbursement MM / DD / YYYY 02 / 17 / 2023	
Mailing Address 333 8TH STREET SE APT 410		FEC Identification Number C [] Transaction ID : SB.5773 Amount of Each Disbursement this Period [] 1250.00	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type []
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) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement MM / DD / YYYY 02 / 17 / 2023	
Mailing Address 300 FIRST STREET SE		FEC Identification Number C [] Transaction ID : SB.5735 Amount of Each Disbursement this Period [] 166.86	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type []
Purpose of Disbursement FOOD/BEVERAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. JETBLUE		Date of Disbursement MM / DD / YYYY 02 / 17 / 2023	
Mailing Address 118-29 WUEENS BLVD		FEC Identification Number C [] Transaction ID : SB.5837 Amount of Each Disbursement this Period [] 468.98	
City FOREST HILLS	State NY	Zip Code 11375	Category/ Type []
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) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1885.84
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) A. JETBLUE		Date of Disbursement MM / DD / YYYY 02 / 17 / 2023
Mailing Address 118-29 WUEENS BLVD		FEC Identification Number C [] Transaction ID : SB.5838 Amount of Each Disbursement this Period [] 468.98
City FOREST HILLS	State NY	Zip Code 11375
Purpose of Disbursement TRAVEL	Category/ Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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. THE RITZ-CARLTON BISCAYNE		Date of Disbursement MM / DD / YYYY 02 / 21 / 2023
Mailing Address 455 GRAND BAY DRIVE		FEC Identification Number C [] Transaction ID : SB.5850 Amount of Each Disbursement this Period [] 179.11
City MIAMI	State FL	Zip Code 33149
Purpose of Disbursement TRAVEL	Category/ Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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) C. TRUIST		Date of Disbursement MM / DD / YYYY 02 / 21 / 2023
Mailing Address 2200 WILSON BLVD SUITE 100		FEC Identification Number C [] Transaction ID : SB.5679 Amount of Each Disbursement this Period [] 15.00
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement BANK FEES	Category/ Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 663.09
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) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 02 / 21 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] Transaction ID : SB.5693 Amount of Each Disbursement this Period [REDACTED] 157.66
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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. ALBANY COUNTY AIRPORT		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 737 ALBANY SHAKER ROAD		FEC Identification Number C [REDACTED] Transaction ID : SB.5761 Amount of Each Disbursement this Period [REDACTED] 112.00
City ALBANY	State NY	Zip Code 12211
Purpose of Disbursement PARKING		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) C. JETBLUE		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 118-29 WUEENS BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5839 Amount of Each Disbursement this Period [REDACTED] 68.00
City FOREST HILLS	State NY	Zip Code 11375
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	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 337.66
TOTAL 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. JETBLUE		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 118-29 WUEENS BLVD		FEC Identification Number C [] Transaction ID : SB.5840 Amount of Each Disbursement this Period [] 79.00
City FOREST HILLS	State NY	Zip Code 11375
Purpose of Disbursement TRAVEL	Category/ Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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. THE RITZ-CARLTON BISCAYNE		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 455 GRAND BAY DRIVE		FEC Identification Number C [] Transaction ID : SB.5851 Amount of Each Disbursement this Period [] 170.65
City MIAMI	State FL	Zip Code 33149
Purpose of Disbursement TRAVEL	Category/ Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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) C. AMAZON		Date of Disbursement MM / DD / YYYY 02 / 24 / 2023
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C [] Transaction ID : SB.5759 Amount of Each Disbursement this Period [] 16.04
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 265.69
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. COMPLIANCE CONSULTING CO OF VIRGINIA LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2023

FEC Identification Number: C

Transaction ID : SB.5686

Amount of Each Disbursement this Period: 1250.00

Memo Item

B. INTUIT

Full Name (Last, First, Middle Initial)

Mailing Address 2700 COAST AVE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB.5782

Amount of Each Disbursement this Period: 55.00

Memo Item

C. THE RITZ-CARLTON BISCAYNE

Full Name (Last, First, Middle Initial)

Mailing Address 455 GRAND BAY DRIVE

City MIAMI State FL Zip Code 33149

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB.5852

Amount of Each Disbursement this Period: 25.64

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1330.64

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) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 02 / 28 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C Transaction ID : SB.5694 Amount of Each Disbursement this Period 47.38
City ARLINGTON	State VA	
Zip Code 22209		Memo Item <input type="checkbox"/>
Purpose of Disbursement CREDIT CARD MERCHANT FEE		
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. GRV STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 03 / 01 / 2023
Mailing Address 731 SEATON AVENUE UNIT 309		FEC Identification Number C Transaction ID : SB.5766 Amount of Each Disbursement this Period 1000.00
City ALEXANDRIA	State VA	
Zip Code 22305		Memo Item <input type="checkbox"/>
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		
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) C. ZOOM		Date of Disbursement MM / DD / YYYY 03 / 01 / 2023
Mailing Address 55 ALMADEN BLVD SUITE 600		FEC Identification Number C Transaction ID : SB.5863 Amount of Each Disbursement this Period 15.74
City SAN JOSE	State CA	
Zip Code 95113		Memo Item <input type="checkbox"/>
Purpose of Disbursement WEB SERVICE		
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	1063.12
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. BARKEATER CHOCOLATES

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3235 NY-28

M M M	/	D D D	/	Y Y Y Y Y
03		02		2023

City
NORTH CREEK

State
NY

Zip Code
12853

FEC Identification Number

Purpose of Disbursement
FOOD/BEVERAGES

C

Transaction ID : SB.5732

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

2620.00

State: District:

Memo Item

B. GOOGLE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1600 AMPHITHEATRE PARKWAY

M M M	/	D D D	/	Y Y Y Y Y
03		02		2023

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

FEC Identification Number

Purpose of Disbursement
WEB SERVICE

C

Transaction ID : SB.5857

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

24.00

State: District:

Memo Item

C. TRUIST

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2200 WILSON BLVD SUITE 100

M M M	/	D D D	/	Y Y Y Y Y
03		03		2023

City
ARLINGTON

State
VA

Zip Code
22201

FEC Identification Number

Purpose of Disbursement
BANK FEES

C

Transaction ID : SB.5680

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

70.00

State: District:

Memo Item

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

2714.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 06 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB.5831 Amount of Each Disbursement this Period [REDACTED] 184.99
City FT WORTH	State TX	Zip Code 76155
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. STAPLES		Date of Disbursement MM / DD / YYYY 03 / 06 / 2023
Mailing Address 3301 RICHMOND HWY		FEC Identification Number C [REDACTED] Transaction ID : SB.5755 Amount of Each Disbursement this Period [REDACTED] 286.16
City ALEXANDRIA	State VA	Zip Code 22305
Purpose of Disbursement OFFICE SUPPLIES		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) C. SWEETGREEN CAPITOL HILL		Date of Disbursement MM / DD / YYYY 03 / 06 / 2023
Mailing Address 221 PENNSYLVANIA AVENUE SE		FEC Identification Number C [REDACTED] Transaction ID : SB.5741 Amount of Each Disbursement this Period [REDACTED] 45.49
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGES		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 516.64
TOTAL 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. TALAY THAI RESTAURANT

Full Name (Last, First, Middle Initial)

Mailing Address 406 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 06 / 2023

FEC Identification Number

C

Transaction ID : SB.5742

Amount of Each Disbursement this Period

114.46

Memo Item

B. MONTGOMERY, TAMARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2522 Q STREET SE

City
WASHINGTON

State
DC

Zip Code
20020

Purpose of Disbursement
PERSONNEL SERVICE/EQUIPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 07 / 2023

FEC Identification Number

C

Transaction ID : SB.5762

Amount of Each Disbursement this Period

350.00

Memo Item

C. BLACK DOG CONSULTING LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4611 3RD STREET S

City
ARLINGTON

State
VA

Zip Code
22204

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 07 / 2023

FEC Identification Number

C

Transaction ID : SB.5763

Amount of Each Disbursement this Period

1125.00

Memo Item

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

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

1589.46

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. 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: 03 / 07 / 2023

FEC Identification Number: C

Transaction ID : SB.5695

Amount of Each Disbursement this Period: 102.13

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: 03 / 09 / 2023

FEC Identification Number: C

Transaction ID : SB.5718

Amount of Each Disbursement this Period: 250.00

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB.5832

Amount of Each Disbursement this Period: 295.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 648.12

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. BARKEATER CHOCOLATES

Full Name (Last, First, Middle Initial)
Mailing Address 3235 NY-28

City NORTH CREEK State NY Zip Code 12853

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 14 / 2023

FEC Identification Number: C

Transaction ID : SB.5733

Amount of Each Disbursement this Period: 170.00

Memo Item

B. RED SPARK STRATEGY

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1269

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 14 / 2023

FEC Identification Number: C

Transaction ID : SB.5725

Amount of Each Disbursement this Period: 2200.46

Memo Item

C. VERIZON

Full Name (Last, First, Middle Initial)
Mailing Address 1095 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement EQUIPMENT PURCHASE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 14 / 2023

FEC Identification Number: C

Transaction ID : SB.5728

Amount of Each Disbursement this Period: 155.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2525.86

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) A. VERIZON		Date of Disbursement MM / DD / YYYY 03 / 14 / 2023
Mailing Address 1095 AVENUE OF THE AMERICAS		FEC Identification Number C [REDACTED] Transaction ID : SB.5729 Amount of Each Disbursement this Period [REDACTED] 239.51
City NEW YORK	State NY	Zip Code 10036
Purpose of Disbursement EQUIPMENT PURCHASE		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. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 03 / 14 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] Transaction ID : SB.5696 Amount of Each Disbursement this Period [REDACTED] 118.35
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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) C. RED SPARK STRATEGY		Date of Disbursement MM / DD / YYYY 03 / 15 / 2023
Mailing Address PO BOX 1269		FEC Identification Number C [REDACTED] Transaction ID : SB.5727 Amount of Each Disbursement this Period [REDACTED] 2200.46
City ANNANDALE	State VA	Zip Code 22003
Purpose of Disbursement DIGITAL CONSULTING/WEB SERVICE/TEXTING		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	

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

2558.32

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. 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: 03 / 16 / 2023

FEC Identification Number: C

Transaction ID : SB.5736

Amount of Each Disbursement this Period: 138.90

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2023

FEC Identification Number: C

Transaction ID : SB.5833

Amount of Each Disbursement this Period: 43.10

Memo Item

C. UBER TECHNOLOGIES

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2023

FEC Identification Number: C

Transaction ID : SB.5745

Amount of Each Disbursement this Period: 28.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 210.93

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) A. UBER TECHNOLOGIES		Date of Disbursement MM / DD / YYYY 03 / 20 / 2023
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : SB.5746 Amount of Each Disbursement this Period 51.84
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement FOOD/BEVERAGES		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. COMPLIANCE CONSULTING CO OF VIRGINIA LLC		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address PO BOX 365		FEC Identification Number C [REDACTED] Transaction ID : SB.5689 Amount of Each Disbursement this Period 1286.16
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING/PRINTING		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) C. JW MARRIOTT ORLANDO		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address 4040 CENTRAL FLORIDA PKWY		FEC Identification Number C [REDACTED] Transaction ID : SB.5841 Amount of Each Disbursement this Period 762.76
City ORLANDO	State FL	Zip Code 32837
Purpose of Disbursement TRAVEL		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	

SUBTOTAL of Disbursements This Page (optional).....▶	2100.76
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) A. LYFT		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address 185 BERRY STREET STE 5000		FEC Identification Number C [REDACTED] Transaction ID : SB.5844 Amount of Each Disbursement this Period [REDACTED] 23.99
City SAN FRANCISCO	State CA	Zip Code 94107
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. TRUIST		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address 2200 WILSON BLVD SUITE 100		FEC Identification Number C [REDACTED] Transaction ID : SB.5681 Amount of Each Disbursement this Period [REDACTED] 15.00
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) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] Transaction ID : SB.5697 Amount of Each Disbursement this Period [REDACTED] 16.86
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 55.85
TOTAL 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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 22 / 2023
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB.5834 Amount of Each Disbursement this Period [] 130.00
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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. UBER TECHNOLOGIES		Date of Disbursement MM / DD / YYYY 03 / 22 / 2023
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C [] Transaction ID : SB.5747 Amount of Each Disbursement this Period [] 31.36
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement FOOD/BEVERAGES		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) C. UBER TECHNOLOGIES		Date of Disbursement MM / DD / YYYY 03 / 22 / 2023
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C [] Transaction ID : SB.5748 Amount of Each Disbursement this Period [] 29.98
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement FOOD/BEVERAGES		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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 191.34
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) A. WAWA INC		Date of Disbursement MM / DD / YYYY 03 / 22 / 2023
Mailing Address 260 WEST BALTIMORE AVE		FEC Identification Number C [] Transaction ID : SB.5854 Amount of Each Disbursement this Period [] 55.26
City MEDIA	State PA	Zip Code 19063
Purpose of Disbursement TRAVEL		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. JW MARRIOTT ORLANDO		Date of Disbursement MM / DD / YYYY 03 / 23 / 2023
Mailing Address 4040 CENTRAL FLORIDA PKWY		FEC Identification Number C [] Transaction ID : SB.5842 Amount of Each Disbursement this Period [] 361.11
City ORLANDO	State FL	Zip Code 32837
Purpose of Disbursement TRAVEL		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) C. JW MARRIOTT ORLANDO		Date of Disbursement MM / DD / YYYY 03 / 23 / 2023
Mailing Address 4040 CENTRAL FLORIDA PKWY		FEC Identification Number C [] Transaction ID : SB.5843 Amount of Each Disbursement this Period [] 61.78
City ORLANDO	State FL	Zip Code 32837
Purpose of Disbursement TRAVEL		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 478.15
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) A. INTUIT		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 2700 COAST AVE		FEC Identification Number C [] Transaction ID : SB.5783 Amount of Each Disbursement this Period [] 55.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTIONS		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. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 28 / 2023
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C [] Transaction ID : SB.5713 Amount of Each Disbursement this Period [] 220.60
City DALLAS	State TX	Zip Code 75201
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) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 03 / 28 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [] Transaction ID : SB.5698 Amount of Each Disbursement this Period [] 22.80
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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 298.40
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)

A. UBER EATS

Mailing Address 1455 MARKET STREET STE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2023

FEC Identification Number

C

Transaction ID : SB.5743

Amount of Each Disbursement this Period

79.80

Memo Item

Full Name (Last, First, Middle Initial)

B. ZOOM

Mailing Address 55 ALMADEN BLVD SUITE 600

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2023

FEC Identification Number

C

Transaction ID : SB.5864

Amount of Each Disbursement this Period

16.79

Memo Item

Full Name (Last, First, Middle Initial)

C. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2023

FEC Identification Number

C

Transaction ID : SB.5858

Amount of Each Disbursement this Period

24.00

Memo Item

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

120.59

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. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR

City DALLAS State TX Zip Code 75201

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: 04 / 04 / 2023

FEC Identification Number: C

Transaction ID : SB.5714

Amount of Each Disbursement this Period: 40.30

Memo Item

B. 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: 04 / 04 / 2023

FEC Identification Number: C

Transaction ID : SB.5699

Amount of Each Disbursement this Period: 58.57

Memo Item

C. GRV STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 731 SEATON AVENUE UNIT 309

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2023

FEC Identification Number: C

Transaction ID : SB.5767

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1098.87

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. 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: 04 / 11 / 2023

FEC Identification Number: C

Transaction ID : SB.5719

Amount of Each Disbursement this Period: 250.00

Memo Item

B. 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: 04 / 11 / 2023

FEC Identification Number: C

Transaction ID : SB.5700

Amount of Each Disbursement this Period: 53.96

Memo Item

C. BLACK DOG CONSULTING LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4611 3RD STREET S

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL/FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2023

FEC Identification Number: C

Transaction ID : SB.5775

Amount of Each Disbursement this Period: 4768.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5072.22

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) A. CAPITOL HILL CLUB		Date of Disbursement MM / DD / YYYY 04 / 18 / 2023
Mailing Address 300 FIRST STREET SE		FEC Identification Number C [] Transaction ID : SB.5737 Amount of Each Disbursement this Period [] 70.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGES		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. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 04 / 18 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [] Transaction ID : SB.5701 Amount of Each Disbursement this Period [] 55.74
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) C. SLEEM, EYAD, , ,		Date of Disbursement MM / DD / YYYY 04 / 20 / 2023
Mailing Address 1102 KINGSLEY PLACE APT B		FEC Identification Number C [] Transaction ID : SB.5749 Amount of Each Disbursement this Period [] 500.00
City CORAM	State NY	Zip Code 11727
Purpose of Disbursement INTERN STIPEND		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 625.74
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) A. COMPLIANCE CONSULTING CO OF VIRGINIA LLC		Date of Disbursement MM / DD / YYYY 04 / 21 / 2023
Mailing Address PO BOX 365		FEC Identification Number C [REDACTED] Transaction ID : SB.5687
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period [REDACTED] 1250.00
Candidate Name		<input type="checkbox"/> Memo Item
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. TRUIST		Date of Disbursement MM / DD / YYYY 04 / 21 / 2023
Mailing Address 2200 WILSON BLVD SUITE 100		FEC Identification Number C [REDACTED] Transaction ID : SB.5682
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period [REDACTED] 15.00
Candidate Name		<input type="checkbox"/> Memo Item
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) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 04 / 25 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] Transaction ID : SB.5702
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Amount of Each Disbursement this Period [REDACTED] 19.33
Candidate Name		<input type="checkbox"/> Memo Item
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1284.33
TOTAL 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. INTUIT		Date of Disbursement MM / DD / YYYY 04 / 26 / 2023
Mailing Address 2700 COAST AVE		FEC Identification Number C [REDACTED] Transaction ID : SB.5784 Amount of Each Disbursement this Period 55.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTIONS		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. NORTH COUNTRY STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 04 / 27 / 2023
Mailing Address 16 NORTHERN PINES ROAD		FEC Identification Number C [REDACTED] Transaction ID : SB.5777 Amount of Each Disbursement this Period 9001.06
City GANSEVOORT	State NY	Zip Code 12831
Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL/FOOD/BEVERAGES		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) C. GOOGLE		Date of Disbursement MM / DD / YYYY 05 / 01 / 2023
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : SB.5859 Amount of Each Disbursement this Period 24.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
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	

SUBTOTAL of Disbursements This Page (optional).....▶	9080.06
TOTAL 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. GRV STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 05 / 01 / 2023
Mailing Address 731 SEATON AVENUE UNIT 309		FEC Identification Number C Transaction ID : SB.5768 Amount of Each Disbursement this Period 1000.00
City ALEXANDRIA	State VA	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) B. RED SPARK STRATEGY		Date of Disbursement MM / DD / YYYY 05 / 01 / 2023
Mailing Address PO BOX 1269		FEC Identification Number C Transaction ID : SB.5726 Amount of Each Disbursement this Period 2220.86
City ANNANDALE	State VA	
Purpose of Disbursement DIGITAL CONSULTING		Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) C. ZOOM		Date of Disbursement MM / DD / YYYY 05 / 01 / 2023
Mailing Address 55 ALMADEN BLVD SUITE 600		FEC Identification Number C Transaction ID : SB.5865 Amount of Each Disbursement this Period 16.79
City SAN JOSE	State CA	
Purpose of Disbursement WEB SERVICE		Memo Item <input type="checkbox"/>
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	3237.65
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) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 05 / 02 / 2023	
Mailing Address 1776 WILSON BLVD #530			
City ARLINGTON	State VA	Zip Code 22209	
Purpose of Disbursement CREDIT CARD MERCHANT FEE		FEC Identification Number C	
Candidate Name		Transaction ID : SB.5703 Amount of Each Disbursement this Period 25.35	
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. CMDI		Date of Disbursement MM / DD / YYYY 05 / 09 / 2023	
Mailing Address 1593 SPRING HILL ROAD STE 400			
City TYSONS CORNER	State VA	Zip Code 22182	
Purpose of Disbursement DATABASE MANAGEMENT SVC		FEC Identification Number C	
Candidate Name		Transaction ID : SB.5720 Amount of Each Disbursement this Period 250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 05 / 09 / 2023	
Mailing Address 1776 WILSON BLVD #530			
City ARLINGTON	State VA	Zip Code 22209	
Purpose of Disbursement CREDIT CARD MERCHANT FEE		FEC Identification Number C	
Candidate Name		Transaction ID : SB.5704 Amount of Each Disbursement this Period 24.03	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....	299.38
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) A. BLACK DOG CONSULTING LLC		Date of Disbursement MM / DD / YYYY 05 / 12 / 2023
Mailing Address 4611 3RD STREET S		FEC Identification Number C [REDACTED] Transaction ID : SB.5774
City ARLINGTON	State VA	Zip Code 22204
Purpose of Disbursement POLITICAL STRATEGY CONSULTING/FOOD/BEVERAGES		Amount of Each Disbursement this Period [REDACTED] 2346.92
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. SLEEM, EYAD, , ,		Date of Disbursement MM / DD / YYYY 05 / 16 / 2023
Mailing Address 1102 KINGSLEY PLACE APT B		FEC Identification Number C [REDACTED] Transaction ID : SB.5750
City CORAM	State NY	Zip Code 11727
Purpose of Disbursement INTERN STIPEND		Amount of Each Disbursement this Period [REDACTED] 500.00
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement MM / DD / YYYY 05 / 16 / 2023
Mailing Address 300 FIRST STREET SE		FEC Identification Number C [REDACTED] Transaction ID : SB.5738
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGES		Amount of Each Disbursement this Period [REDACTED] 98.85
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2945.77
TOTAL 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. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 05 / 16 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] Transaction ID : SB.5705 Amount of Each Disbursement this Period [REDACTED] 35.84
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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. COMPLIANCE CONSULTING CO OF VIRGINIA LLC		Date of Disbursement MM / DD / YYYY 05 / 18 / 2023
Mailing Address PO BOX 365		FEC Identification Number C [REDACTED] Transaction ID : SB.5688 Amount of Each Disbursement this Period [REDACTED] 1250.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING		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) C. INTUIT		Date of Disbursement MM / DD / YYYY 05 / 22 / 2023
Mailing Address 2700 COAST AVE		FEC Identification Number C [REDACTED] Transaction ID : SB.5785 Amount of Each Disbursement this Period [REDACTED] 55.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTIONS		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1340.84
TOTAL 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. TRUIST

Mailing Address 2200 WILSON BLVD SUITE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
BANK FEES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.5683

Amount of Each Disbursement this Period

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

/ /

FEC Identification Number

Transaction ID : SB.5706

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. 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

/ /

FEC Identification Number

Transaction ID : SB.5707

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 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		Date of Disbursement MM / DD / YYYY 06 / 01 / 2023
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : SB.5860 Amount of Each Disbursement this Period 24.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement WEB SERVICE		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. GRV STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 06 / 05 / 2023
Mailing Address 731 SEATON AVENUE UNIT 309		FEC Identification Number C [REDACTED] Transaction ID : SB.5769 Amount of Each Disbursement this Period 1000.00
City ALEXANDRIA	State VA	Zip Code 22305
Purpose of Disbursement POLITICAL STRATEGY 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) C. NORTH COUNTRY STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 06 / 05 / 2023
Mailing Address 16 NORTHERN PINES ROAD		FEC Identification Number C [REDACTED] Transaction ID : SB.5770 Amount of Each Disbursement this Period 3000.00
City GANSEVOORT	State NY	Zip Code 12831
Purpose of Disbursement POLITICAL STRATEGY 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	

SUBTOTAL of Disbursements This Page (optional).....▶	4024.00
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)
E-PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 06 / 06 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] Transaction ID : SB.5708 Amount of Each Disbursement this Period [REDACTED] 139.21
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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. CMDI		Date of Disbursement MM / DD / YYYY 06 / 09 / 2023
Mailing Address 1593 SPRING HILL ROAD STE 400		FEC Identification Number C [REDACTED] Transaction ID : SB.5721 Amount of Each Disbursement this Period [REDACTED] 250.00
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT SVC		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) C. BLACK DOG CONSULTING LLC		Date of Disbursement MM / DD / YYYY 06 / 13 / 2023
Mailing Address 4611 3RD STREET S		FEC Identification Number C [REDACTED] Transaction ID : SB.5776 Amount of Each Disbursement this Period [REDACTED] 2892.63
City ARLINGTON	State VA	Zip Code 22204
Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL/FOOD/BEVERAGES		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3281.84
TOTAL 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. WILEY REIN LLP		Date of Disbursement MM / DD / YYYY 06 / 13 / 2023
Mailing Address PO BOX 800		FEC Identification Number C
City NEWARK	State NJ	
Purpose of Disbursement LEGAL CONSULTING		Transaction ID : SB.5753
Candidate Name		Amount of Each Disbursement this Period 5000.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 06 / 13 / 2023
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C
City ARLINGTON	State VA	
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Transaction ID : SB.5709
Candidate Name		Amount of Each Disbursement this Period 94.05
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) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. SLEEM, EYAD, , ,		Date of Disbursement MM / DD / YYYY 06 / 15 / 2023
Mailing Address 1102 KINGSLEY PLACE APT B		FEC Identification Number C
City CORAM	State NY	
Purpose of Disbursement INTERN STIPEND		Transaction ID : SB.5751
Candidate Name		Amount of Each Disbursement this Period 1000.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	6094.05
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. 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: 06 / 15 / 2023

FEC Identification Number: C

Transaction ID : SB.5739

Amount of Each Disbursement this Period: 102.50

Memo Item

B. 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: 06 / 20 / 2023

FEC Identification Number: C

Transaction ID : SB.5710

Amount of Each Disbursement this Period: 54.16

Memo Item

C. TRUIST

Full Name (Last, First, Middle Initial)

Mailing Address 2200 WILSON BLVD SUITE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 21 / 2023

FEC Identification Number: C

Transaction ID : SB.5684

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 171.66

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)

A. INTUIT

Mailing Address 2700 COAST AVE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2023

FEC Identification Number

C

Transaction ID : SB.5786

Amount of Each Disbursement this Period

55.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2023

FEC Identification Number

C

Transaction ID : SB.5711

Amount of Each Disbursement this Period

48.30

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR

City DALLAS State TX Zip Code 75201

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2023

FEC Identification Number

C

Transaction ID : SB.5715

Amount of Each Disbursement this Period

49.98

Memo Item

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

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

153.28

**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. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 06 / 30 / 2023	
Mailing Address 1776 WILSON BLVD #530			
City ARLINGTON	State VA	Zip Code 22209	
Purpose of Disbursement CREDIT CARD MERCHANT FEE		FEC Identification Number C	
Candidate Name		Transaction ID : SB.5712 Amount of Each Disbursement this Period 329.91	
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.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

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

SUBTOTAL of Disbursements This Page (optional).....	329.91
TOTAL This Period (last page this line number only).....	98008.38

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)
E-PAC

A. ASHLEY HINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 811

M M M	/	D D D	/	Y Y Y Y Y
02		28		2023

City
MARION

State
IA

Zip Code
52302

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00706267
---	-----------

Transaction ID : SB.5885

Amount of Each Disbursement this Period

Candidate Name

HINSON, ASHLEY, , ,

Category/
Type

5000.00

Office Sought:

House
 Senate
 President

Disbursement For: 2024

Primary General
 Other (specify) ▼

Memo Item

State: IA District: 02

B. DESPOSITO FOR NEW YORK

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 188

M M M	/	D D D	/	Y Y Y Y Y
02		28		2023

City
ISLAND PARK

State
NY

Zip Code
11558

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION GENERAL 2024

C	C00809426
---	-----------

Transaction ID : SB.5872

Amount of Each Disbursement this Period

Candidate Name

DESPOSITO, ANTHONY, , ,

Category/
Type

5000.00

Office Sought:

House
 Senate
 President

Disbursement For: 2024

Primary General
 Other (specify) ▼

Memo Item

State: NY District: 04

C. DESPOSITO FOR NEW YORK

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 188

M M M	/	D D D	/	Y Y Y Y Y
02		28		2023

City
ISLAND PARK

State
NY

Zip Code
11558

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00809426
---	-----------

Transaction ID : SB.5892

Amount of Each Disbursement this Period

Candidate Name

DESPOSITO, ANTHONY, , ,

Category/
Type

5000.00

Office Sought:

House
 Senate
 President

Disbursement For: 2024

Primary General
 Other (specify) ▼

Memo Item

State: NY District: 04

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

15000.00

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
E-PAC

A. KIGGANS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5042

City
VIRGINIA BEACH

State
VA

Zip Code
23471

Purpose of Disbursement
CONTRIBUTION GENERAL 2024

Candidate Name

KIGGANS, JENNIFER, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: VA District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

FEC Identification Number

C C00776120

Transaction ID : SB.5873

Amount of Each Disbursement this Period

5000.00

Memo Item

B. KIGGANS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5042

City
VIRGINIA BEACH

State
VA

Zip Code
23471

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Candidate Name

KIGGANS, JENNIFER, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify)

State: VA District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

FEC Identification Number

C C00776120

Transaction ID : SB.5902

Amount of Each Disbursement this Period

5000.00

Memo Item

C. LALOTA FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5744

City
HAUPPAUGE

State
NY

Zip Code
11788

Purpose of Disbursement
CONTRIBUTION GENERAL 2024

Candidate Name

LALOTA, NICK, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: NY District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

FEC Identification Number

C C00806018

Transaction ID : SB.5874

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

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)
E-PAC

A. LALOTA FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 5744

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Candidate Name
LALOTA, NICK, , ,

Office Sought: House Senate President
State: NY District: 01

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: **C** C00806018
Transaction ID : SB.5903

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. LAWLER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 87

City SAOUTH SALEM State NY Zip Code 10590

Purpose of Disbursement
CONTRIBUTION GENERAL 2024

Candidate Name
LAWLER, MIKE, , ,

Office Sought: House Senate President
State: NY District: 17

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: **C** C00815415
Transaction ID : SB.5875

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. LAWLER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 87

City SAOUTH SALEM State NY Zip Code 10590

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Candidate Name
LAWLER, MIKE, , ,

Office Sought: House Senate President
State: NY District: 17

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: **C** C00815415
Transaction ID : SB.5905

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15000.00

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)
E-PAC

A. LORI CHAVEZ-DEREMER FOR CONGRESS

Full Name (Last, First, Middle Initial)
LORI CHAVEZ-DEREMER FOR CONGRESS

Date of Disbursement: 02 / 28 / 2023

Mailing Address: 13203 SE 172ND AVENUE SUITE 166 #3

City: HAPPY VALLEY | State: OR | Zip Code: 97086

Purpose of Disbursement: CONTRIBUTION GENERAL 2024

Candidate Name: CHAVEZ-DEREMER, LORI, , ,

Office Sought: House | Disbursement For: 2024

State: OR | District: 05

Category/Type: Primary General Other (specify) ▼

FEC Identification Number: C00784520
Transaction ID: SB.5876
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. LORI CHAVEZ-DEREMER FOR CONGRESS

Full Name (Last, First, Middle Initial)
LORI CHAVEZ-DEREMER FOR CONGRESS

Date of Disbursement: 02 / 28 / 2023

Mailing Address: 13203 SE 172ND AVENUE SUITE 166 #3

City: HAPPY VALLEY | State: OR | Zip Code: 97086

Purpose of Disbursement: CONTRIBUTION PRIMARY 2024

Candidate Name: CHAVEZ-DEREMER, LORI, , ,

Office Sought: House | Disbursement For: 2024

State: OR | District: 05

Category/Type: Primary General Other (specify) ▼

FEC Identification Number: C00784520
Transaction ID: SB.5906
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. MARC FOR US INC

Full Name (Last, First, Middle Initial)
MARC FOR US INC

Date of Disbursement: 02 / 28 / 2023

Mailing Address: PO BOX 5158

City: POUGHKEEPSIE | State: NY | Zip Code: 12602

Purpose of Disbursement: CONTRIBUTION GENERAL 2024

Candidate Name: MOLINARO, MARC, , ,

Office Sought: House | Disbursement For: 2024

State: NY | District: 19

Category/Type: Primary General Other (specify) ▼

FEC Identification Number: C00789586
Transaction ID: SB.5877
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15000.00

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)
E-PAC

A. MARC FOR US INC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 5158

City: POUGHKEEPSIE State: NY Zip Code: 12602

Purpose of Disbursement: CONTRIBUTION PRIMARY 2024

Candidate Name: **MOLINARO, MARC, , ,**

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: NY District: 19

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: **C00789586**
Transaction ID : **SB.5907**
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. MICHELLE STEEL FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 92A SURFSIDE AVENUE #472

City: SURFSIDE State: CA Zip Code: 90743

Purpose of Disbursement: CONTRIBUTION GENERAL 2024

Candidate Name: **STEEL, MICHELLE, , ,**

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: CA District: 45

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: **C00704981**
Transaction ID : **SB.5878**
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. MICHELLE STEEL FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 92A SURFSIDE AVENUE #472

City: SURFSIDE State: CA Zip Code: 90743

Purpose of Disbursement: CONTRIBUTION PRIMARY 2024

Candidate Name: **STEEL, MICHELLE, , ,**

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: CA District: 45

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: **C00704981**
Transaction ID : **SB.5908**
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15000.00

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)
E-PAC

Full Name (Last, First, Middle Initial) A. MILLER-MEEKS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 02 / 28 / 2023
Mailing Address PO BOX 33		FEC Identification Number C 000558825 Transaction ID : SB.5911
City OTTUMWA	State IA	Zip Code 52501
Purpose of Disbursement CONTRIBUTION PRIMARY 2024		Amount of Each Disbursement this Period 5000.00
Candidate Name MILLER-MEEKS, MARIANNETTE, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	

Full Name (Last, First, Middle Initial) B. MONICA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 02 / 28 / 2023
Mailing Address 1317 W FRONTAGE ROAD SUITE C		FEC Identification Number C 000765719 Transaction ID : SB.5879
City ALAMO	State TX	Zip Code 78516
Purpose of Disbursement CONTRIBUTION GENERAL 2024		Amount of Each Disbursement this Period 5000.00
Candidate Name DE LA CRUZ, MONICA, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 15	

Full Name (Last, First, Middle Initial) C. MONICA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 02 / 28 / 2023
Mailing Address 1317 W FRONTAGE ROAD SUITE C		FEC Identification Number C 000765719 Transaction ID : SB.5912
City ALAMO	State TX	Zip Code 78516
Purpose of Disbursement CONTRIBUTION PRIMARY 2024		Amount of Each Disbursement this Period 5000.00
Candidate Name DE LA CRUZ, MONICA, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 15	

SUBTOTAL of Disbursements This Page (optional).....▶	15000.00
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)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
E-PAC

A. SALAZAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Date input fields: MM/02, DD/28, YYYY/2023

Mailing Address 3725 WEST FLAGLAR STEET #281

FEC Identification Number

FEC ID input: C00714261

Transaction ID : SB.5880

Amount of Each Disbursement this Period

Amount input: 5000.00

Memo Item checkbox

City MIAMI, State FL, Zip Code 33134

Purpose of Disbursement CONTRIBUTION GENERAL 2024

Candidate Name ELVIRO-SALAZAR, MARIA, , ,

Office Sought: House (checked), Senate, President; Disbursement For: 2024, Primary, General (checked), Other (specify)

State: FL, District: 27

B. SALAZAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Date input fields: MM/02, DD/28, YYYY/2023

Mailing Address 3725 WEST FLAGLAR STEET #281

FEC Identification Number

FEC ID input: C00714261

Transaction ID : SB.5915

Amount of Each Disbursement this Period

Amount input: 5000.00

Memo Item checkbox

City MIAMI, State FL, Zip Code 33134

Purpose of Disbursement CONTRIBUTION PRIMARY 2024

Candidate Name ELVIRO-SALAZAR, MARIA, , ,

Office Sought: House (checked), Senate, President; Disbursement For: 2024, Primary (checked), General, Other (specify)

State: FL, District: 27

C. YOUNG KIM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Date input fields: MM/02, DD/28, YYYY/2023

Mailing Address PO BOX 2186

FEC Identification Number

FEC ID input: C00665638

Transaction ID : SB.5881

Amount of Each Disbursement this Period

Amount input: 5000.00

Memo Item checkbox

City FULLERTON, State CA, Zip Code 92837

Purpose of Disbursement CONTRIBUTION GENERAL 2024

Candidate Name KIM, YOUNG, , ,

Office Sought: House (checked), Senate, President; Disbursement For: 2024, Primary, General (checked), Other (specify)

State: CA, District: 40

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

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

Subtotal amount input: 15000.00

Total amount input: 15000.00

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)
E-PAC

A. YOUNG KIM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2186

M M M	/	D D D	/	Y Y Y Y Y
02		28		2023

City
FULLERTON

State
CA

Zip Code
92837

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00665638
---	-----------

Candidate Name

KIM, YOUNG, , ,

Category/
Type

Transaction ID : SB.5921

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

State: CA District: 40

Disbursement For: 2024

Primary General
 Other (specify) ▼

5000.00

Memo Item

B. BRANDON FOR CONGRESS NY22

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3580

M M M	/	D D D	/	Y Y Y Y Y
03		03		2023

City
SYRACUSE

State
NY

Zip Code
13220

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION GENERAL 2024

C	C00806307
---	-----------

Candidate Name

WILLIAMS, BRANDON, , ,

Category/
Type

Transaction ID : SB.5871

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

State: NY District: 22

Disbursement For: 2024

Primary General
 Other (specify) ▼

5000.00

Memo Item

C. BRANDON FOR CONGRESS NY22

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3580

M M M	/	D D D	/	Y Y Y Y Y
03		03		2023

City
SYRACUSE

State
NY

Zip Code
13220

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00806307
---	-----------

Candidate Name

WILLIAMS, BRANDON, , ,

Category/
Type

Transaction ID : SB.5887

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

State: NY District: 22

Disbursement For: 2024

Primary General
 Other (specify) ▼

5000.00

Memo Item

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

15000.00

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
E-PAC

A. KEAN FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 999

M M M	/	D D D	/	Y Y Y Y Y
03		08		2023

City EDISON State NJ Zip Code 08818

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00703058
---	-----------

Candidate Name
KEAN, THOMAS, H, , JR

Category/
Type

Transaction ID : **SB.5898**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: NJ District: 07

2000.00

Memo Item

B. TONY GONZALES FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 14439 NW MILITARY HWY STE 108-488

M M M	/	D D D	/	Y Y Y Y Y
03		08		2023

City SAN ANTONIO State TX Zip Code 78231

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00706614
---	-----------

Candidate Name
GONZALES, TONY, , ,

Category/
Type

Transaction ID : **SB.5918**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: TX District: 23

2000.00

Memo Item

C. MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1212

M M M	/	D D D	/	Y Y Y Y Y
03		10		2023

City MURPHYSBORO State IL Zip Code 62966

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00546499
---	-----------

Candidate Name
BOST, MICHAEL, , ,

Category/
Type

Transaction ID : **SB.5909**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: IL District: 12

1000.00

Memo Item

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
E-PAC

Full Name (Last, First, Middle Initial) A. BANKS FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 14 / 2023
Mailing Address PO BOX 11431		FEC Identification Number C 000577999 Transaction ID : SB.5886
City FOR WAYNE	State IN	Zip Code 46858
Purpose of Disbursement CONTRIBUTION PRIMARY 2024		Amount of Each Disbursement this Period 2000.00
Candidate Name BANKS, JAMES, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ANNA PAULINA LUNA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 28 / 2023
Mailing Address PO BOX 23064		FEC Identification Number C 000718239 Transaction ID : SB.5884
City ST. PETERSBURG	State FL	Zip Code 33742
Purpose of Disbursement CONTRIBUTION PRIMARY 2024		Amount of Each Disbursement this Period 5000.00
Candidate Name LUNA, ANNA, PAULINA, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 13	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. BRIAN FITZPATRICK FOR ALL OF US		Date of Disbursement MM / DD / YYYY 03 / 28 / 2023
Mailing Address PO BOX 939		FEC Identification Number C 000607416 Transaction ID : SB.5888
City LANGHORNE	State PA	Zip Code 19047
Purpose of Disbursement CONTRIBUTION PRIMARY 2024		Amount of Each Disbursement this Period 1000.00
Candidate Name FITZPATRICK, BRIAN, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 01	<input type="checkbox"/> Memo Item

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

8000.00

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)
E-PAC

A. CHUCK EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 337 NORTH MAIN STREET

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

City HENDERSONVILLE State NC Zip Code 28792

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00796433
---	-----------

Candidate Name
EDWARDS, CHUCK, , ,

Category/
Type

Transaction ID : **SB.5889**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: NC District: 11

5000.00

Memo Item

B. CISCOMANI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 35103

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

City TUCSON State AZ Zip Code 85740

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00786194
---	-----------

Candidate Name
CISCOMANI, JUAN, , ,

Category/
Type

Transaction ID : **SB.5890**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: AZ District: 06

5000.00

Memo Item

C. DON BACON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 391368

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

City OMAHA State NE Zip Code 68139

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00575167
---	-----------

Candidate Name
BACON, DON, , ,

Category/
Type

Transaction ID : **SB.5893**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: NE District: 02

5000.00

Memo Item

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

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

15000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
E-PAC

Form A: FRIENDS OF DAVID SCHWEIKERT. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: IOWANS FOR ZACH NUNN. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: JOHN DUARTE FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 15000.00
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)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
E-PAC

Form A: JOHN JAMES FOR CONGRESS INC. Includes fields for Date of Disbursement (03/28/2023), Mailing Address (PO BOX 628), City (ST CLAIR SHORES), State (MI), Zip Code (48080), Purpose of Disbursement (CONTRIBUTION PRIMARY 2024), Candidate Name (JAMES, JOHN, ,), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (1000.00).

Form B: KEAN FOR CONGRESS INC. Includes fields for Date of Disbursement (03/28/2023), Mailing Address (PO BOX 999), City (EDISON), State (NJ), Zip Code (08818), Purpose of Disbursement (CONTRIBUTION PRIMARY 2024), Candidate Name (KEAN, THOMAS, H, , JR), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (3000.00).

Form C: KEN CALVERT FOR CONGRESS COMMITTEE. Includes fields for Date of Disbursement (03/28/2023), Mailing Address (PO BOX 2438), City (CORONA), State (CA), Zip Code (92837), Purpose of Disbursement (CONTRIBUTION PRIMARY 2024), Candidate Name (CALVERT, KEN, , ,), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (5000.00).

SUBTOTAL of Disbursements This Page (optional) 9000.00
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)
E-PAC

Full Name (Last, First, Middle Initial)

A. KEVIN KILEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

Mailing Address 9458 TREELAKE ROAD

FEC Identification Number

C	C00801985
---	-----------

City GRANITE BAY State CA Zip Code 95746

Transaction ID : **SB.5901**

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Amount of Each Disbursement this Period

Candidate Name
KILEY, KEVIN, , ,

Category/
Type

5000.00

Office Sought: House
 Senate
 President
State: CA District: 03

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. LAUREN BOEBERT FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

Mailing Address PO BOX 752

FEC Identification Number

C	C00728238
---	-----------

City RIFLE State CO Zip Code 81650

Transaction ID : **SB.5904**

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Amount of Each Disbursement this Period

Candidate Name
BOEBERT, LAUREN, , ,

Category/
Type

5000.00

Office Sought: House
 Senate
 President
State: CO District: 03

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. MIKE GARCIA FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

Mailing Address 9070 IRVINE CENTER DRIVE #150

FEC Identification Number

C	C00701102
---	-----------

City IRVINE State CA Zip Code 92618

Transaction ID : **SB.5910**

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Amount of Each Disbursement this Period

Candidate Name
GARCIA, MIKE, , ,

Category/
Type

5000.00

Office Sought: House
 Senate
 President
State: CA District: 27

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
E-PAC

A. NANCY MACE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 295 SEVEN FARMS DRIVE STE C-186

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

City CHARLESTON State SC Zip Code 29492

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00710103
---	-----------

Candidate Name
MACE, NANCY, , ,

Category/
Type

Transaction ID : SB.5913

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: SC District: 01

Disbursement For: 2024
 Primary General
 Other (specify) ▼

5000.00

Memo Item

B. PATRIOTS FOR PERRY

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 4075 LINGLESTOWN ROAD PMB 119

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

City HARRISBURG State PA Zip Code 17112

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00510164
---	-----------

Candidate Name
PERRY, SCOTT, , ,

Category/
Type

Transaction ID : SB.5914

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: PA District: 10

Disbursement For: 2024
 Primary General
 Other (specify)

5000.00

Memo Item

C. STEIL FOR WISCONSIN INC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1818 MILTON AVE #1448

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

City JANESVILLE State WI Zip Code 53545

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

C	C00677286
---	-----------

Candidate Name
STEIL, BRYAN, , ,

Category/
Type

Transaction ID : SB.5917

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: WI District: 01

Disbursement For: 2024
 Primary General
 Other (specify) ▼

5000.00

Memo Item

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

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

15000.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
E-PAC

A. VALADAO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 5132 N PALM AVE #227

City FRESNO State CA Zip Code 93704

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Candidate Name
VALADAO, DAVID, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: CA District: 22

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2023

FEC Identification Number

C C00499392

Transaction ID : SB.5919

Amount of Each Disbursement this Period

5000.00

Memo Item

B. VAN ORDEN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 565

City PRAIRIE DU CHIEN State WI Zip Code 53821

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Candidate Name
VAN ORDEN, DERRICK, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: WI District: 03

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2023

FEC Identification Number

C C00742007

Transaction ID : SB.5920

Amount of Each Disbursement this Period

5000.00

Memo Item

C. ZINKE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 704C 13TH STREET E STE 260

City WHITEFISH State MT Zip Code 59937

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Candidate Name
ZINKE, RYAN, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: MT District: 01

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2023

FEC Identification Number

C C00778159

Transaction ID : SB.5923

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

12000.00

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)
E-PAC

A. CONGRESSIONAL LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

Mailing Address 1747 PENNSYLVANIA AVENUE NW 5TH FL

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2023

FEC Identification Number

C C00504530

Transaction ID : SB.5869

Amount of Each Disbursement this Period

5000.00

Memo Item

B. YVETTE4CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 1111 10TH STREET #404

City ALAMOGORDO State NM Zip Code 88310

Purpose of Disbursement
CONTRIBUTION GENERAL 2024

Candidate Name

HERRELL, STELLA, YVETTE, ,

Office Sought: House Senate President

State: NM District: 02

Disbursement For: 2024 Primary General Other (specify)

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2023

FEC Identification Number

C C00655571

Transaction ID : SB.5882

Amount of Each Disbursement this Period

5000.00

Memo Item

C. YVETTE4CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 1111 10TH STREET #404

City ALAMOGORDO State NM Zip Code 88310

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Candidate Name

HERRELL, STELLA, YVETTE, ,

Office Sought: House Senate President

State: NM District: 02

Disbursement For: 2024 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2023

FEC Identification Number

C C00655571

Transaction ID : SB.5922

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

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)
E-PAC

A. MAGGIE'S LIST

Full Name (Last, First, Middle Initial)

Mailing Address 6675 WEEPING WILLOW WAY

City TALLAHASSEE State FL Zip Code 32311

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2023

FEC Identification Number: C00469023

Transaction ID : SB.5868

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. FRY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 14641

City SURFSIDE BEACH State SC Zip Code 29587

Purpose of Disbursement CONTRIBUTION PRIMARY DEBT RETIREMENT 2022

Candidate Name FRY, RUSSELL, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify)

State: SC District: 07

Date of Disbursement: 04 / 17 / 2023

FEC Identification Number: C00786657

Transaction ID : SB.5924

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. CORY MILLS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 501 N ORLANDO AVENUE SUITE 313 PMB

City WINTER PARK State FL Zip Code 32789

Purpose of Disbursement CONTRIBUTION PRIMARY 2024

Candidate Name MILLS, CORY, , ,

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: FL District: 07

Date of Disbursement: 04 / 24 / 2023

FEC Identification Number: C00774943

Transaction ID : SB.5891

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9500.00

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)
E-PAC

A. SCOTT BAUGH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 4040 MACARTHUR BLVD SUITE 200

City
NEWPORT

State
CA

Zip Code
92660

Purpose of Disbursement
CONTRIBUTION PRIMARY 2024

Candidate Name

BAUGH, SCOTT, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: CA District: 47

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	3

FEC Identification Number

C C00798322

Transaction ID : SB.5916

Amount of Each Disbursement this Period

5000.00

Memo Item

B. HISPANIC LEADERSHIP TRUST

Full Name (Last, First, Middle Initial)

Mailing Address 1005 CONGRESS AVE STE 400

City
AUSTIN

State
TX

Zip Code
78701

Purpose of Disbursement
CONTRIBUTION

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
0	5		2	4		2	0	2	3

FEC Identification Number

C C00809970

Transaction ID : SB.5870

Amount of Each Disbursement this Period

1000.00

Memo Item

C. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
CONTRIBUTION

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
0	6		3	0		2	0	2	3

FEC Identification Number

C C00075820

Transaction ID : SB.5866

Amount of Each Disbursement this Period

15000.00

Memo Item

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

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

21000.00

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)
E-PAC

Full Name (Last, First, Middle Initial) A. NRCC		Date of Disbursement MM / DD / YYYY 06 / 30 / 2023
Mailing Address 320 FIRST STREET SE		FEC Identification Number C C00075820 Transaction ID : SB.5867
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONTRIBUTION BUILDING FUND		Amount of Each Disbursement this Period 30000.00 BUILDING FUND
Candidate Name		<input type="checkbox"/> Memo Item
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	30000.00
TOTAL This Period (last page this line number only).....▶	289500.00

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

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NAME OF COMMITTEE (In Full)
E-PAC

A. NEW YORK YOUNG REPUBLICAN CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 53 WEST 28TH STREET #5

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement CONTRIBUTION NON-FEDERAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2023

FEC Identification Number: C

Transaction ID : SB.5883

Amount of Each Disbursement this Period: 250.00

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00