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Image# 202001319184627691

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Than An Aut	horized Committee	Office	Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typover the lines.	12FE4M5	
WONDER WOMEN V	ICTORY COMMITTE	<b>E</b>		
ADDRESS (number and street)	PO BOX 9891			
Check if different than previously reported. (ACC)	ARLINGTON		VA 222	119
2. FEC IDENTIFICATION N	UMBER ▼ CIT	<b>Y</b> ▲	STATE ▲	ZIP CODE ▲
C C00664250	** **	S THIS NEW (N)	OR AMENDE	D
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	Report Due On: Mar	20 (M2) May 20 20 (M3) Jun 20 20 (M4) Jul 20	(M6) Sep 20 (M9	(Non-Election Year Only)  Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (0  July 15 Quarterly Report (0  October 15 Quarterly Report (0	PRE-Election Report for the:	Primary (12P)  Convention (12C)	General (12G)  Special (12S)	Runoff (12R)
January 31 Year-End Report (	(E) Election		/ Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-electic Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)		on on	D / Y = Y = Y = Y	in the State of
5. Covering Period 10	0 01 2019	through		2019
I certify that I have examined the Type or Print Name of Treasure	OTTENHOFF, BENJAMIN,		it is true, correct and comp	lete.
Signature of Treasurer OTT	ENHOFF, BENJAMIN, , ,	[Electronically Filed		31 2020
NOTE: Submission of false, erron	eous, or incomplete information	n may subject the person si	gning this Report to the pena	alties of 52 U.S.C. § 30109
Office Use			FE	C FORM 3X Rev. 05/2016

OF FEC Form 3X (Rev. 05/2016)	RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name		
WONDER WOMEN VICTORY COM	MITTEE	
Report Covering the Period: From:	/ 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. (a) Cash on Hand  January 1,  2019	[	8099.55
(b) Cash on Hand at  Beginning of Reporting Period	26024.65	
(c) Total Receipts (from Line 19)	29500.00	85000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	55524.65	93099.55
7. Total Disbursements (from Line 31)	5540.30	43115.20
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	49984.35	49984.35
Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multicand	lidate committee. (see FEC FORM 1M)	
Fo	r 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### WONDER WOMEN VICTORY COMMITTEE

10 01 2019 31 2019 12 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 2500.00 11500.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized ..... (iii) TOTAL (add 11500.00 2500.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 27000.00 73500.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 85000.00 29500.00 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (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))....... 29500.00 85000.00 20. Total Federal Receipts 29500.00 85000.00 (subtract Line 18(c) from Line 19) .......▶

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Caronau roal to bate			
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating					
Expenditures	5540.30	8349.04			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	5540.30	8349.04			
Transfers to Affiliated/Other Party	4 4	4 1 4 1 4			
Contributions to	0.00	34766.16			
Federal Candidates/Committees and Other Political Committees	0.00	0.00			
Independent Expenditures (use Schedule E)	0.00	0.00			
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00			
(use Schedule F)	0.00	0.00			
Loan Repayments Made	0.00	0.00			
	4 4	4 4			
Loans Made	0.00	0.00			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees	0.00	0.00			
(such as PACs)	0.00	0.00			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00			
	0.00	0.00			
Other Disbursements (Including Non-Federal Donations)	0.00	0.00			
,	0.00	0.00			
Federal Election Activity (52 U.S.C. § 30101) (a) Allocated Federal Election Activity	(20))				
(from Schedule H6)					
(i) Federal Share	0.00	0.00			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid	4 4	4 4 4			
Entirely With Federal Funds	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
Total Diaburaamanta (add Lines 24/5) 22					
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5540.30	43115.20			
	3340.30	43113.20			
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	5540.30	43115.20			

#### **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)	29500.00	85000.00		
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29500.00	85000.00		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	5540.30	8349.04		
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5540.30	8349.04		

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

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

FOR LINE NUMBER:					PAGE	6	OF	10		
(check only one)										
		X	11a		11b		11c	12	!	
			13		14		15	16	;	17

		ical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) WONDER WOMEN VICTORY	COMMITTEE	
Full Name of Individual (Last, First, Middle In KAEHLER, NORMA, H, ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 40291 FEATHERBED LN		12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LOVETTSVILLE	State Zip Code VA 20180	Transaction ID : SA11AI.4277  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual)  AMERICAN AIRLINES	Occupation (for Individu	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	1000.00
Full Name of Individual (Last, First, Middle In OKUN, BERNARD, R, ,  Mailing Address 6612 MAUGH RD	itial) or Full Organization Name	Date of Receipt
City MCLEAN	State Zip Code VA 22101	Transaction ID : SA11Al.4275  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer (for Individual) THE O TEAM	Occupation (for Individu	Memo Item CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	500.00
Full Name of Individual (Last, First, Middle In SIEKMAN, PAMELA, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 4597 NEISWANDER SQUA	RE	12 17 2019
City NEW ALBANY	State Zip Code OH 43054	Transaction ID : SA11AI.4261  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual) SIEKMAN, SIEKMAN AND ASSOCIATES Receipt For:	Occupation (for Individu	,
Primary General Other (specify)	Aggregate Year-to-Date ▼	1000.00
SUBTOTAL of Receipts This Page (optional)		2500.00
TOTAL This Period (last page this line number	only)	2500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 10 (check only one)  11a 11b
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) WONDER WOMEN VICTORY	СОММІТ	TEE	
Full Name of Individual (Last, First, Middle In AMERICAN AIRLINES INC. POLITICA			Date of Receipt
Mailing Address 1200 17TH STREET NW SUITE 400			12 31 2019
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SA11C.4271  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0107300	2000.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	]
Full Name of Individual (Last, First, Middle In AMERICAN COLLEGE OF CARDIOLOG Mailing Address 2400 N ST NW			Date of Receipt  12 31 2019
City WASHINGTON	State DC	Zip Code 20037	Transaction ID : SA11C.4269  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0375360	2000.00
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼  2000.00	
Full Name of Individual (Last, First, Middle In CAPITAL ONE FINANCIAL COR			Date of Receipt
Mailing Address 1600 CAPITAL ONE DRIVE			12 31 2019
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SA11C.4267  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0326595	5000.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item CONTRIBUTION
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00	1

SUBTOTAL of Receipts This Page (optional).....

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

9000.00

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

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Dotailed Carrinary 1 age			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions ress of any political committee to solicit contributions from such committee.											
ΞE											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) WONDER WOMEN VICTORY COMMITTE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DELOITTE POLITICAL ACTION COMMITTEE Date of Receipt Mailing Address P.O. BOX 365 2019 30 City Zip Code State Transaction ID: SA11C.4265 WASHINGTON DC 20044 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 C00211318 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name NATIONAL AUTOMOBILE DEALERS ASSOCIATION POLITICAL ACTION COMMITTEE Date of Receipt Mailing Address 8484 WESTPARK DRIVE; SUITE 500 10 80 2019 City Zip Code State Transaction ID: SA11C.4259 **TYSONS** VA 22102 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 C00040998 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. POLARIS INDUSTRIES POLITICAL PARTICIPATION PROGRAM Date of Receipt Mailing Address 2100 HIGHWAY 55 12 31 2019 City Zip Code State Transaction ID: SA11C.4273 MN **MEDINA** 55340 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 C00279497 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 12000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

	F	OR	LINE	NU	MBER	:	PAGE	_	9	OF		10
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for each category of the Detailed Summary Page			11a		11b	X	11c		12	2		
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not be sold or used by any person for the purpose of soliciting contributions												

Any infame -	tion conied from ough Describe and Ot-	tomorts :	ov not be cold or used by servi	norman for the number of adjusting and the still
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
1 \	F COMMITTEE (In Full) DER WOMEN VICTORY C	OMMIT	TEE	
	e of Individual (Last, First, Middle Initia MOTOR NORTH AMERICA, INC POLITICAL			Date of Receipt
Mailing A	ddress 325 7TH STREET, NW, SUITE	12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City WASHIN	IGTON	Transaction ID : SA11C.4263  Amount of Each Receipt this Period		
	number of contributing olitical committee.	C co	0542365	6000.00
Name of	Employer (for Individual)	Occ	supation (for Individual)	Memo Item CONTRIBUTION
	For: mary General ner (specify) ▼			
В	e of Individual (Last, First, Middle Initia	l) or Full C	Organization Name	Date of Receipt
Mailing A	ddress	To: .	7. 2.1	M = M / D = D / Y = Y = Y
City		State	Zip Code	Amount of Each Receipt this Period
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Name of	Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
	For: mary General ner (specify) ▼	Aggregate	Year-to-Date ▼	
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	Employer (for Individual)	Occ	eupation (for Individual)	Memo Item
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SUBTOTAL	of Receipts This Page (optional)			6000.00
TOTAL Thi	s Period (last page this line number or	nlv)		27000.00

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Use segrate schedule) (elect only one) (elect one) (elect only one) (elect one) (elect only one) (elect only one) (elect only one) (elect one	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 OF 10						
Any information copied from such Reports and Statements may regis   X  21b   28   28   20   20   30    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)  WONDER WOMEN VICTORY COMMITTEE  Full Name (Last, First, Middle Initial)  A. ANEDOT  Mailing Address 1920 MCKINNEY AVE 7TH FIR  ON THE R	•				NOMBELL:					
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for 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)  WONDER WOMEN VICTORY COMMITTEE  Full Name (Last, First, Middle Initial)  A. ANEDOT  Mailing Address 1920 MCKINNEY AVE 7TH FIR  City Office Sought:  State  Disbursement For:  State  Disbursement For:  Gray  Amount of Each Disbursement Inis Period  Type  Office Sought:  Memo Item  Ball Other (specify)  Memo Item  FEC Identification Number  C.  Amount of Each Disbursement Inis Period  Type  Amount of Each Disbursement Inis Period  Disbursement Inis Period  Type  Disbursement Inis Period  Type  Disbursement Inis Period  Type  Amount of Each Disbursement Inis Period  Disbursement Inis Period  Type  Amount of Each Disbursement Inis Period  Disbursement Inis Period  Type  Amount of Each Disbursement Inis Period	THE DISCUSTINE TO SERVICE TO SERV			<b>X</b> 21b	<i>-</i>					
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 Pull) WONDER WOMEN VICTORY COMMITTEE  Full Name (Last, First, Middle Initial)  A. ANEDOT  Mailing Address 1920 MCKINNEY AVE 7TH FIR  City Oblica Sought: State Pripose of Disbursement CREDIT CARD PROCESSING FEE Candidate Name  Category/ Type  Disbursement For:  City San FRANCISCO Purpose of Disbursement For:  City San FRANCISCO Office Sought: House Pripose of Disbursement For:  City San FRANCISCO Office Sought: House Pripose of Disbursement For:  City San FRANCISCO Category/ Type  Office Sought: House Pripose of Disbursement For:  City San FRANCISCO Charleson Total Primary Category/ Type  Office Sought: House Primary City State: Disbursement For:  City San Francisco Disbursement For:  Category/ Type  Office Sought: House Primary Category/ Purpose of Disbursement  Category/ Type  FEC Identification Number  Category/ Type  FEC Identif		Detailed		28a	28b 28c 29 30b					
NAME OF COMMENT VICTORY COMMITTEE  Full Name (Last, First, Middle Initial)  ANEDOT  Mailing Address 1920 MCKINNEY AVE  7TH FLR  City DALLAS TX 75201  Purpose of Disbursement CREDIT CARD PROCESSING FEE  Candidate Name  Office Sought: House Senate Primary General Primary General Primase of Disbursement FAULTY RENTAL / EVENT ENTRANCE FEE  Candidate Name  City SAN FARACISCO District: Senate Primary General Primary										
WONDER WOMEN VICTORY COMMITTEE  Full Name (Last, First, Middle Initial)  A ANEDOT  Mailing Address 1920 MCKINNEY AVE		ine and add	iress or arry politi	cai committee to	Solicit Continuations from Such Confinitiee.					
A ANEDOT  Mailing Address 1920 MCKINNEY AVE 7TH FLR  City DALLAS Purpose of Disbursement CREDIT CARD PROCESSING FEE Candidate Name  Office Sought:   House   Disbursement For:   General   Prinsprend Facility Revision ID: SB21B.4255   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4255   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4255   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4255   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4255   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.4256   Amount of Each Disbursement fine Period  Transaction ID: SB21B.	I \ '	MMITT	EE							
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Mailing Address 1920 MCKINNEY AVE 7TH FLR  City	A. ANEDOT									
THER  City DALLAS Purpose of Disbursement CREDIT CARD PROCESSING FEE  Candidate Name  Office Sought:	Mailing Address 1920 MCKINNEY AVE									
DALLAS	-									
Purpose of Disbursement CREDIT CARD PROCESSING FEE  Candidate Name  Category/ Type  Office Sought: House Senate Primary General State: District:  Full Name (Last, First, Middle Initial)  B. JUUL LABS, INC.  Mailing Address 560 20TH ST  City SAN FRANCISCO Purpose of Disbursement FACILITY RENTAL / EVENT ENTRANCE FEE  Candidate Name  Category/ Type  Office Sought: President State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Office Sought: President State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Office Sought: President State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Office Sought: President Candidate Name  Category/ Type  Office Sought: President Candidate Name  Category/ Type  Office Sought: House Disbursement  Category/ Type  Office Sought: House Disbursement For: Senate Primary General  Office Sought: House Senate Primary General  Office Sought Senate Primary Senate Prim	•				FEC Identification Number					
CREDIT CARD PROCESSING FEE  Candidate Name  Office Sought:		IX	/5201							
Caregory/ Type  Office Sought: House Senate Primary General General Primary General Ge										
Office Sought: House   Disbursement For:   Senate   President   Other (specify)   Memo Item	Candidate Name			Category/						
Senate President Other (specify)   State: District:  Full Name (Last, First, Middle Initial)  B. JUUL LABS, INC.  Mailing Address 560 20TH ST  City SAN FRANCISCO State CA 94107  Purpose of Disbursement FACILITY RENTAL / EVENT ENTRANCE FEE Candidate Name  Office Sought: House President Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Category/ Type  Office Sought: Senate Primary General Other (specify)  Mailing Address  City State Zip Code Category/ Type  State: District:  Full Name (Last, First, Middle Initial)  C. Category/ Type  Office Sought: House Disbursement For: Senate Primary General Category/ Type  Office Sought: Other (specify)  Mailing Address  City State Zip Code FEC Identification Number Category/ Type  Office Sought: Other (specify)  Memo Item  State: Disbursement This Page (optional)  Memo Item  State: District: Memo Item										
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State: District: Full Name (Last, First, Middle Initial)  B. JUUL LABS, INC.  Mailing Address 560 20TH ST  City San Francisco Purpose of Disbursement FACILITY RENTAL / EVENT ENTRANCE FEE  Candidate Name  Office Sought: House Primary Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code CA 94107  FEC Identification Number  Category/ Type  Office Sought: House Primary General Other (specify)  Memo Item  Date of Disbursement this Period  FEC Identification Number  Category/ Type  Transaction ID: S8218.4256  Amount of Each Disbursement this Period  Date of Disbursement  C.  Mailing Address  City State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: House Primary General Primary General Other (specify) We Memo Item  Santa Primary General Primary General Other (specify) We Memo Item  State: District:  Substortal of Disbursements This Page (optional)										
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