

**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

Together Everyone Realizes Real Impact PAC

ADDRESS (number and street)

499 S Capitol Street SW

Suite 420

Washington

DC

20003

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00525030

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
PRE-Election  
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

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

in the  
State of(d) 30-Day  
POST-Election  
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2021

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2021

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

Angerholzer, Lindsay, F., ,

Type or Print Name of Treasurer

Signature of Treasurer

Angerholzer, Lindsay, F., ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 19 2022

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Together Everyone Realizes Real Impact PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2021 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2021</span>		<span style="border: 1px solid black; padding: 2px;">76980.03</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">31709.28</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">75025.50</span>	<span style="border: 1px solid black; padding: 2px;">93525.50</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">106734.78</span>	<span style="border: 1px solid black; padding: 2px;">170505.53</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">49980.37</span>	<span style="border: 1px solid black; padding: 2px;">113751.12</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">56754.41</span>	<span style="border: 1px solid black; padding: 2px;">56754.41</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ 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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Together Everyone Realizes Real Impact PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	1

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).....	5000.00	10000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	10000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	70000.00	81000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	75000.00	91000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	25.50	25.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
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)) .....	75025.50	93525.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	75025.50	93525.50

# **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
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 .....	25980.37	34751.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	25980.37	34751.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24000.00	29000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	50000.00
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)) ..	49980.37	113751.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49980.37	113751.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	75000.00	91000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	75000.00	91000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	25980.37	34751.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	25.50	25.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	25954.87	34725.62

# 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 24

(check only one)

☒ 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)

Together Everyone Realizes Real Impact PAC

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

A. Gates, Melinda, F., ,

Mailing Address 10230 NE Points Dr  
Ste 200City  
KirklandState  
WAZip Code  
98033-7897FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Bill & Melinda Gates FoundationOccupation (for Individual)  
Co-Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 19 / 2021

Transaction ID : VVBMYX542V2

Amount of Each Receipt this Period

5000.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

B. ActBlue Technical Services

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 19 / 2021

Transaction ID : VVBMYX542V2E

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C.

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

5000.00

5000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 24

(check only one)

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

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)

Together Everyone Realizes Real Impact PAC

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

**A. FRESENIUS MEDICAL CARE NORTH AMERICA PAC**

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 ▼

5000.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
07 / 22 / 2021

Transaction ID : VVBMYX3Z6H2

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 51 Madison Ave  
Rm 1109

City  
New York

State  
NY

Zip Code  
10010-1603

FEC ID number of contributing  
federal political committee.

**C** C00158881

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
09 / 22 / 2021

Transaction ID : VVBMYX64V54

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')**

Mailing Address 601 Hawaii St

City  
El Segundo

State  
CA

Zip Code  
90245-4814

FEC ID number of contributing  
federal political committee.

**C** C00340943

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 / D D / Y Y Y Y Y Y**  
11 / 16 / 2021

Transaction ID : VVBMYX7XCV6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

11000.00

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 8 OF 24

(check only one)

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

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)

Together Everyone Realizes Real Impact PAC

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

**A. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 N Michigan Ave

City  
ChicagoState  
ILZip Code  
60611-4011FEC 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
11	/	23	/	2021

Transaction ID : VVBMYX8NNJ2

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. ALABAMA POWER CO EMPLOYEES FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address PO Box 242

City

Birmingham

State

AL

Zip Code

35292-0001

FEC ID number of contributing  
federal political committee.

C C00077305

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
12	/	02	/	2021

Transaction ID : VVBMYX8PA39

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FE**

Mailing Address 2001 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20006-1850

FEC ID number of contributing  
federal political committee.

C C00248716

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
12	/	02	/	2021

Transaction ID : VVBMYX8PA53

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

12500.00



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

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

FOR LINE NUMBER: PAGE 9 OF 24

(check only one)

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

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)

**Together Everyone Realizes Real Impact PAC**

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

Mailing Address 1875 I St NW  
 Ste 500

City  
 Washington

State  
 DC

Zip Code  
 20006-5425

FEC ID number of contributing  
 federal political committee.

**C** C00303339

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 02 / 2021

Transaction ID : VVBMYX8PA21

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 Daingerfield Rd

City  
 Alexandria

State  
 VA

Zip Code  
 22314-2886

FEC ID number of contributing  
 federal political committee.

**C** C00030809

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 02 / 2021

Transaction ID : VVBMYX8PA45

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address 1 Busch Pl  
 # 202-7

City  
 Saint Louis

State  
 MO

Zip Code  
 63118-1849

FEC ID number of contributing  
 federal political committee.

**C** C00034488

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 / D D / Y Y Y Y Y  
 12 / 07 / 2021

Transaction ID : VVBMYX8P9W4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

8500.00

# 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 10 OF 24

☐ 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)

Together Everyone Realizes Real Impact PAC

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

### A. LIBERTY MUTUAL INSURANCE COMPANY - PAC

Mailing Address 175 Berkeley St

City  
Boston

State  
MA

Zip Code  
02116-3350

FEC ID number of contributing  
federal political committee.

C C00171843

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 07 / 2021

Transaction ID : VVBMYX8P9V6

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

### B. FEDEX CORPORATION POLITICAL ACTION COMMITTEE (FEDEXPAC)

Mailing Address 942 Shady Grove Rd S

City  
Memphis

State  
TN

Zip Code  
38120-4117

FEC ID number of contributing  
federal political committee.

C C00068692

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 14 / 2021

Transaction ID : VVBMYX92SK3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

### C. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 Prince St  
Ste 300

City  
Alexandria

State  
VA

Zip Code  
22314-2845

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 ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 20 / 2021

Transaction ID : VVBMYX93CP7

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

7500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 24  
(check only one)

☐ 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)

Together Everyone Realizes Real Impact PAC

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

### A. Capital One Financial Corporation

Mailing Address 1680 Capital One Dr

City  
Mc Lean

State  
VA

Zip Code  
22102-3407

FEC ID number of contributing  
federal political committee.

C

C00326595

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 20 / 2021

Transaction ID : VVBMYX93CK3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

### B. HUMANA INC. POLITICAL ACTION COMMITTEE

Mailing Address 975 F St NW  
Ste 550

City  
Washington

State  
DC

Zip Code  
20004-1458

FEC ID number of contributing  
federal political committee.

C

C00271007

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 20 / 2021

Transaction ID : VVBMYX93CM1

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

### C. ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 Constitution Ave NW  
Ste 400W

City  
Washington

State  
DC

Zip Code  
20001-2155

FEC ID number of contributing  
federal political committee.

C

C00089136

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2021

Transaction ID : VVBMYX9RQZ6

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

10000.00

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 12 OF 24

☐ 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)

Together Everyone Realizes Real Impact PAC

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

### A. BLUE CROSS BLUE SHIELD OF ALABAMA PAC

Mailing Address 2 N Jackson St  
Ste 202

City  
Montgomery

State  
AL

Zip Code  
36104-3821

FEC ID number of contributing  
federal political committee.

C C00457242

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2021

Transaction ID : VVBMYX9RQV4

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

### B. CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Mailing Address 400 Atlantic St  
FI 10

City

Stamford

State  
CT

Zip Code  
06901-3512

FEC ID number of contributing  
federal political committee.

C C00426775

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2021

Transaction ID : VVBMYX9RQY8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

### C. DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')

Mailing Address 601 Hawaii St

City

El Segundo

State  
CA

Zip Code  
90245-4814

FEC ID number of contributing  
federal political committee.

C C00340943

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2021

Transaction ID : VVBMYX9RQX0

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

9500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 24

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Together Everyone Realizes Real Impact PAC****A. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

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

Mailing Address 1401 H St NW  
Ste 1200City  
WashingtonState  
DCZip Code  
20005-2110FEC 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 ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2021**Transaction ID : VVBMYX9RQT7**

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B. L3HARRIS TECHNOLOGIES, INC. PAC**

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

Mailing Address 600 Maryland Ave SW  
Ste 850ECity  
WashingtonState  
DCZip Code  
20024-2566FEC ID number of contributing  
federal political committee.**C** C00100321

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2021**Transaction ID : VVBMYX9RR12**

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C. SUNOVION PHARMACEUTICALS INC. GOOD GOVERNANCE FUND**

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

Mailing Address 84 Waterford Dr

City  
MarlboroughState  
MAZip Code  
01752-7010FEC ID number of contributing  
federal political committee.**C** C00423236

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 / D D / Y Y Y Y Y  
12 31 2021**Transaction ID : VVBMYX9RQW2**

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

# **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 14 OF 24

☐ 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)

**Together Everyone Realizes Real Impact PAC**

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

## **A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F St NW  
Ste 400

City  
Washington

State  
DC

Zip Code  
20004-1346

FEC ID number of contributing  
federal political committee.

**C** C00284885

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**12** / **31** / **2021**

**Transaction ID : VVBMX9RR04**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

## **B.**

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

Amount of Each Receipt this Period

☐ Memo Item

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

## **C.**

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

2500.00

70000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 24

<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)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		03		2021

Mailing Address 1225 I St NW  
Ste 1225City  
WashingtonState  
DCZip Code  
20005-5918Purpose of Disbursement  
Software

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VVANPAQTX

Amount of Each Disbursement this Period

318.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2021

Mailing Address 499 S Capitol St SW  
Ste 422City  
WashingtonState  
DCZip Code  
20003-4028Purpose of Disbursement  
Fundraising Consulting Fees and Reimbursed Expenses

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VVANPAQTXI

Amount of Each Disbursement this Period

10606.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2021

Mailing Address 499 S Capitol St SW  
Ste 422City  
WashingtonState  
DCZip Code  
20003-4028Purpose of Disbursement  
Fundraising Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VVANPAQTX

Amount of Each Disbursement this Period

1500.00

☒ Memo Item

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

10924.00

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)

PAGE 16 OF 24

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

## **A. Angerholzer Broz Consulting**

Mailing Address 499 S Capitol St SW  
Ste 422

City  
Washington

State  
DC

Zip Code  
20003-4028

Purpose of Disbursement  
Compliance Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2021

FEC Identification Number

**C** Transaction ID : VVANPAQTX

Amount of Each Disbursement this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Angerholzer Broz Consulting**

Mailing Address 499 S Capitol St SW  
Ste 422

City  
Washington

State  
DC

Zip Code  
20003-4028

Purpose of Disbursement  
Fundraising Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2021

FEC Identification Number

**C** Transaction ID : VVANPAQTX

Amount of Each Disbursement this Period

1500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Angerholzer Broz Consulting**

Mailing Address 499 S Capitol St SW  
Ste 422

City  
Washington

State  
DC

Zip Code  
20003-4028

Purpose of Disbursement  
Compliance Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2021

FEC Identification Number

**C** Transaction ID : VVANPAQTX

Amount of Each Disbursement this Period

500.00

☒ Memo Item

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

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

0.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 24

<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)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2021

Mailing Address 499 S Capitol St SW  
Ste 422City  
WashingtonState  
DCZip Code  
20003-4028Purpose of Disbursement  
Fundraising Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** **Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

 1500.00☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2021

Mailing Address 499 S Capitol St SW  
Ste 422City  
WashingtonState  
DCZip Code  
20003-4028Purpose of Disbursement  
Fundraising Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** **Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

 1500.00☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2021

Mailing Address 499 S Capitol St SW  
Ste 422City  
WashingtonState  
DCZip Code  
20003-4028Purpose of Disbursement  
Fundraising Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** **Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

 1500.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 24

<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)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz Consulting**Mailing Address 499 S Capitol St SW  
Ste 422City  
WashingtonState  
DCZip Code  
20003-4028Purpose of Disbursement  
Compliance Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2021

FEC Identification Number

**C****Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting**Mailing Address 499 S Capitol St SW  
Ste 422City  
WashingtonState  
DCZip Code  
20003-4028Purpose of Disbursement  
Compliance Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2021

FEC Identification Number

**C****Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz Consulting**Mailing Address 499 S Capitol St SW  
Ste 422City  
WashingtonState  
DCZip Code  
20003-4028Purpose of Disbursement  
Compliance Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2021

FEC Identification Number

**C****Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

500.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 24

<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)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. The Salt Line**

Mailing Address 79 Potomac Ave SE

City  
WashingtonState  
DCZip Code  
20003-3848Purpose of Disbursement  
Fundraising Catering Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	8			2	0	2	1		

FEC Identification Number

**C****Transaction ID : VVANPAQTV**

Amount of Each Disbursement this Period

1310.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Ritz Carlton, St. Thomas**

Mailing Address 6900 Great Bay

City  
St ThomasState  
VIZip Code  
00802-1010Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	2			2	0	2	1		

FEC Identification Number

**C****Transaction ID : VVANPAQTXI**

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NGP VAN, Inc.**Mailing Address 1225 I St NW  
Ste 1225City  
WashingtonState  
DCZip Code  
20005-5918Purpose of Disbursement  
Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	3			2	0	2	1		

FEC Identification Number

**C****Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

318.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9628.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 24

<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)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. The Ritz Carlton, St. Thomas**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2021

Mailing Address 6900 Great Bay

City  
St ThomasState  
VIZip Code  
00802-1010Purpose of Disbursement  
Travel Expense

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:

FEC Identification Number

C

Transaction ID : VVANPAQTX

Amount of Each Disbursement this Period

5095.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5095.52

25647.52

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 24

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. CARTWRIGHT FOR CONGRESS**

Mailing Address PO Box 414

City  
ScrantonState  
PAZip Code  
18501-0414Purpose of Disbursement  
Political Contribution

Candidate Name

**CARTWRIGHT, MATT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	2	1		

FEC Identification Number

**C** C00509968**Transaction ID : VVANPAQTW**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CLARKE FOR CONGRESS**

Mailing Address 111-36 200TH. STREET

City  
HollisState  
NYZip Code  
11412Purpose of Disbursement  
Political Contribution

Candidate Name

**CLARKE, YVETTE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 09

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	2	1		

FEC Identification Number

**C** C00415331**Transaction ID : VVANPAQTW**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JAHANA HAYES**

Mailing Address PO Box 1487

City  
WaterburyState  
CTZip Code  
06721-1487Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	2	1		

FEC Identification Number

**C** C00677898**Transaction ID : VVANPAQTX**

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).....▶

8500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 24

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF LUCY MCBATH INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	2	1		

Mailing Address 1860 Sandy Plains Rd  
Ste 204-210City  
MariettaState  
GAZip Code  
30066-7833Purpose of Disbursement  
Political Contribution

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 06

FEC Identification Number

**C** C00672295**Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MALONEY FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	2	1		

Mailing Address 49 E 92Nd St

City  
New YorkState  
NYZip Code  
10128-1326Purpose of Disbursement  
Political Contribution

Candidate Name

**MALONEY, CAROLYN B, , ,**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: NY District: 12

FEC Identification Number

**C** C00273169**Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	2	1		

Mailing Address 5956 W Race Ave

City  
ChicagoState  
ILZip Code  
60644-1462Purpose of Disbursement  
Political Contribution

Candidate Name

**Davis, Danny, K., ,**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 07

FEC Identification Number

**C** C00172619**Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 24

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. LAUREN UNDERWOOD FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	2	1		

Mailing Address 2758 US Highway 34  
Ste BCity  
OswegoState  
ILZip Code  
60543-8301Purpose of Disbursement  
Political Contribution

Candidate Name

**UNDERWOOD, LAUREN A, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 14

Category/  
Type

FEC Identification Number

**C** C00652719**Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NEVADANS FOR STEVEN HORSFORD**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	2	1		

Mailing Address PO Box 336664

City  
North Las VegasState  
NVZip Code  
89033-6664Purpose of Disbursement  
Political Contribution

Candidate Name

**HORSFORD, STEVEN ALEXZANDER, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV District: 04

Category/  
Type

FEC Identification Number

**C** C00668228**Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NEVADANS FOR STEVEN HORSFORD**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	2			2	0	2	1		

Mailing Address PO Box 336664

City  
North Las VegasState  
NVZip Code  
89033-6664Purpose of Disbursement  
Political Contribution

Candidate Name

**HORSFORD, STEVEN ALEXZANDER, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 04

Category/  
Type

FEC Identification Number

**C** C00668228**Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 24

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Together Everyone Realizes Real Impact PAC**

Full Name (Last, First, Middle Initial)

**A. NEVADANS FOR STEVEN HORSFORD**

Mailing Address PO Box 336664

City  
North Las VegasState  
NVZip Code  
89033-6664Purpose of Disbursement  
Political Contribution

Candidate Name

**HORSFORD, STEVEN ALEXZANDER, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				02				2021					

FEC Identification Number

**C** C00668228**Transaction ID : VVANPAQTX**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MONDAIRE FOR CONGRESS**Mailing Address 499 S Capitol St SW  
Ste 407City  
WashingtonState  
DCZip Code  
20003-4016Purpose of Disbursement  
Political Contribution

Candidate Name

**JONES, MONDAIRE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 17

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				21				2021					

FEC Identification Number

**C** C00711150**Transaction ID : VVANPAQTX!**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

24000.00