

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 ANN PAC

ADDRESS (number and street) PO BOX 3535 Check if different than previously reported. (ACC) BALLWIN MO 63022-3535

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00531764 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: [X] April 15 Quarterly Report (Q1) (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 [] in the State of [] (d) 30-Day POST-Election Report for the: [] General (30G) [] Runoff (30R) [] Special (30S) Election on [] in the State of []

5. Covering Period 01 / 01 / 2022 through 03 / 31 / 2022

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

Signature of Treasurer DATWYLER, THOMAS, , [Electronically Filed] Date 04 / 15 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ANN PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		105460.38
(b) Cash on Hand at Beginning of Reporting Period.....	105460.38	
(c) Total Receipts (from Line 19)	34693.72	34693.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	140154.10	140154.10
7. Total Disbursements (from Line 31).....	54743.00	54743.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	85411.10	85411.10
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ANN PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 01 / 01 / 2022 To: M M / D D / Y Y Y Y Y 03 / 31 / 2022

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	30000.00	30000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	30000.00	30000.00
12. Transfers From Affiliated/Other Party Committees.....	4093.72	4093.72
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).....	600.00	600.00
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)).....▶	34693.72	34693.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	34693.72	34693.72

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	21243.00	21243.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	21243.00	21243.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33500.00	33500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	54743.00	54743.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54743.00	54743.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	30000.00	30000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30000.00	30000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	21243.00	21243.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	600.00	600.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20643.00	20643.00

**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 6 OF 16
<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)
ANN PAC

A. CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1600 CAPITAL ONE DR

City MC LEAN	State VA	Zip Code 22102-3473
FEC ID number of contributing federal political committee. C C00326595		
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 ▼ 5000.00

Date of Receipt
03 / 11 / 2022
Transaction ID : AE9D4C92E72CB41FE85D

Amount of Each Receipt this Period
5000.00

Memo Item

B. CMR POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152
FEC ID number of contributing federal political committee. C C00469429		
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 ▼ 2500.00

Date of Receipt
03 / 31 / 2022
Transaction ID : A73A430C979424AA78C1

Amount of Each Receipt this Period
2500.00

Memo Item

C. DELOITTE FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 365

City WASHINGTON	State DC	Zip Code 20044
FEC ID number of contributing federal political committee. C C00211318		
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 ▼ 2500.00

Date of Receipt
02 / 18 / 2022
Transaction ID : A1649DD64891C4627882

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 7 OF 16
<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)
ANN PAC

A. MORTGAGE BANKERS ASSOCIATION (MORPAC) POLITICAL ACTION COMMI
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 M STREET NW
 5TH FLOOR
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00004812
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2022
Transaction ID : AA96B59550AF74D7ABF4
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. NATIONAL MULTIFAMILY HOUSING COUNCIL (NMHC) PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 EYE STREET, NW
 SUITE 100
 City WASHINGTON State DC Zip Code 20006
 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
 03 / 31 / 2022
Transaction ID : A7DF2B2B562DD44738D3
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 13TH STREET NW
 SUITE 1000
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00107235
 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 / 31 / 2022
Transaction ID : AE05B6E7264A34D37A2E
 Amount of Each Receipt this Period
 5000.00
 Memo Item

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 8 OF 16
<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)
ANN PAC

A. WELLS FARGO EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 S 7TH ST
MAC N9305-16C

City MINNEAPOLIS State MN Zip Code 55402-3903

FEC ID number of contributing federal political committee. **C** C00034595

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 / 2022
Transaction ID : AEC9ED3B255E844E482F

Amount of Each Receipt this Period
2500.00

Memo Item

B. WELLS FARGO EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 S 7TH ST
MAC N9305-16C

City MINNEAPOLIS State MN Zip Code 55402-3903

FEC ID number of contributing federal political committee. **C** C00034595

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 / 2022
Transaction ID : A29D871B3D60F483CA65

Amount of Each Receipt this Period
2500.00

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	30000.00

**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 9 OF 16
<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)
ANN PAC

A. WAGNER VICTORY COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 183

City HUDSON	State WI	Zip Code 54016-0183
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00775387

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4093.72

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2022

Transaction ID : AA804D802ED6540CC8BB

Amount of Each Receipt this Period
4093.72

Memo Item
TRANSFER FROM AUTHORIZED COMMITTEE

B. COPELAND, GERRET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 242 S WASHINGTON BLVD
PMB 361

City SARASOTA	State FL	Zip Code 34236-6943
------------------	-------------	------------------------

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 ▼
.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2021

Transaction ID : AE9E55E22011444AF9D4

Amount of Each Receipt this Period
4600.00

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
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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).....	4093.72
TOTAL This Period (last page this line number only).....	4093.72

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ANN PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ARISTOTLE INTERNATIONAL, INC.

Mailing Address **205 PENNSYLVANIA AVE SE**

City WASHINGTON	State DC	Zip Code 20003-1164
---------------------------	--------------------	-------------------------------

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 ▼
600.00

Date of Receipt
02 / 08 / 2022

Transaction ID : A9F975D7718094A06842

Amount of Each Receipt this Period
600.00

Memo Item
DATABASE REFUND

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	600.00

**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 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)
ANN PAC

Full Name (Last, First, Middle Initial) A. 9SEVEN CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 01 / 03 / 2022
Mailing Address 499 S CAPITOL ST SW STE 405		FEC Identification Number C [REDACTED] Transaction ID : B3E05A484B Amount of Each Disbursement this Period 825.00
City WASHINGTON	State DC	Zip Code 20003-4018
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type 001
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. ARISTOTLE INTERNATIONAL, INC.		Date of Disbursement MM / DD / YYYY 01 / 28 / 2022
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C [REDACTED] Transaction ID : B4DE325719C Amount of Each Disbursement this Period 600.00
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement DATABASE EXPENSES		Category/Type 001
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. ARISTOTLE INTERNATIONAL, INC.		Date of Disbursement MM / DD / YYYY 03 / 01 / 2022
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C [REDACTED] Transaction ID : B1682C12DC Amount of Each Disbursement this Period 1200.00
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement DATABASE EXPENSES		Category/Type 001
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)..... ▶

2625.00

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)
ANN PAC

Full Name (Last, First, Middle Initial)

A. THE HIGH POINT GROUP

Mailing Address PO BOX 15276

City
WASHINGTON

State
DC

Zip Code
20003-0276

Purpose of Disbursement
FUNDRAISING CONSULTING

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		02		2022

FEC Identification Number

C []

Transaction ID : BEC4E9B502
Amount of Each Disbursement this Period

[] 18475.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
[]		[]		[]

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	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)..... ▶

[] 18475.00

[] 21100.00

**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)
ANN PAC

A. AMANDA ADKINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 24085

M M M	/	D D D	/	Y Y Y Y Y
03		30		2022

City OVERLAND PARK State KS Zip Code 66283-4085

FEC Identification Number

Purpose of Disbursement
POLITICAL CONTRIBUTION

C	C00717876
---	-----------

Candidate Name
ADKINS, AMANDA, , ,

011
Category/ Type

Transaction ID : B3BBB76B30

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: KS District: 03

2500.00

Memo Item

B. COMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 338

M M M	/	D D D	/	Y Y Y Y Y
01		07		2022

City TOMPKINSVILLE State KY Zip Code 42167-0338

FEC Identification Number

Purpose of Disbursement
POLITICAL CONTRIBUTION

C	C00588764
---	-----------

Candidate Name
COMER, JAMIE, , ,

011
Category/ Type

Transaction ID : B0A8E9CF35!

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: KY District: 01

3000.00

Memo Item

C. ELIZABETH HENG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 5434

M M M	/	D D D	/	Y Y Y Y Y
03		07		2022

City FRESNO State CA Zip Code 93755-5434

FEC Identification Number

Purpose of Disbursement
POLITICAL CONTRIBUTION

C	C00771824
---	-----------

Candidate Name
HENG, ELIZABETH, , ,

011
Category/ Type

Transaction ID : BE7ED4511F

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CA District: 22

1000.00

Memo Item

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

6500.00

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)
ANN PAC

A. ERIN HOUCHIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 234

M M M	/	D D D	/	Y Y Y Y Y
02		07		2022

City SALEM State IN Zip Code 47167-0234

FEC Identification Number

Purpose of Disbursement
POLITICAL CONTRIBUTION

C	C00800649
---	-----------

Candidate Name
HOUCHIN, ERIN, , ,

011

Category/
Type

Transaction ID : **B9BCDADED**
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IN District: 09

2500.00

Memo Item

B. ESTHER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2821 10TH ST

M M M	/	D D D	/	Y Y Y Y Y
03		30		2022

City EAST MOLINE State IL Zip Code 61244-3236

FEC Identification Number

Purpose of Disbursement
POLITICAL CONTRIBUTION

C	C00716498
---	-----------

Candidate Name
JOY KING, ESTHER, , ,

011

Category/
Type

Transaction ID : **BCAC2ACCE**
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IL District: 17

2500.00

Memo Item

C. 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		17		2022

City EDISON State NJ Zip Code 08818-0999

FEC Identification Number

Purpose of Disbursement
POLITICAL CONTRIBUTION

C	C00703058
---	-----------

Candidate Name
KEAN, THOMAS, , ,

011

Category/
Type

Transaction ID : **B60BA1ACD**
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NJ District: 07

2500.00

Memo Item

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

7500.00

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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
ANN PAC

Form A: LAHOOD FOR CONGRESS. Includes fields for Name, Address, City (PEORIA), State (IL), Zip Code (61612-0735), Purpose (POLITICAL CONTRIBUTION), Candidate Name (LAHOOD, DARIN), Office Sought (House), Disbursement For (2022), and Amount (5000.00).

Form B: MARSHA FOR SENATE. Includes fields for Name, Address, City (BRENTWOOD), State (TN), Zip Code (37024-3750), Purpose (POLITICAL CONTRIBUTION), Candidate Name (BLACKBURN, MARSHA), Office Sought (Senate), Disbursement For (2022), and Amount (5000.00).

Form C: MICHELLE STEEL FOR CONGRESS. Includes fields for Name, Address, City (SURFSIDE), State (CA), Zip Code (90743), Purpose (POLITICAL CONTRIBUTION), Candidate Name (STEEL, MICHELLE), Office Sought (House), Disbursement For (2022), and Amount (2000.00).

SUBTOTAL of Disbursements This Page (optional) 12000.00
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)
ANN PAC

A. VAN TAYLOR CAMPAIGN

Full Name (Last, First, Middle Initial)
VAN TAYLOR CAMPAIGN

Date of Disbursement: 02 / 16 / 2022

Mailing Address: 1900 PRESTON RD STE 267

City: PLANO State: TX Zip Code: 75093-3604

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: VAN TAYLOR, NICHOLAS, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: TX District: 03

FEC Identification Number: C00653634
Transaction ID: B344C2781C
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

B. ZINKE FOR CONGRESS

Full Name (Last, First, Middle Initial)
ZINKE FOR CONGRESS

Date of Disbursement: 03 / 30 / 2022

Mailing Address: PO BOX 1597

City: HELENA State: MT Zip Code: 59624-1597

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: ZINKE, RYAN, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ANNUAL

State: MT District: 01

FEC Identification Number: C00778159
Transaction ID: B1A814F0C1
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number

Amount of Each Disbursement this Period

Category/Type

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	33500.00