

# 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**  
**DENALI LEADERSHIP PAC**

ADDRESS (number and street) **901 N WASHINGTON ST**  
**SUITE 700**  
 Check if different than previously reported. (ACC) **ALEXANDRIA VA 22314**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00438291** 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  /  /  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  /  /  2024 through  /  /  2024

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

Signature of Treasurer **KOCH, TIMOTHY, A.,** Date  /  /  2024

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

**DENALI LEADERSHIP 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="2024"/>		<input type="text" value="773331.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="773331.11"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="78300.00"/>	<input type="text" value="78300.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="851631.11"/>	<input type="text" value="851631.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="104188.02"/>	<input type="text" value="104188.02"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="747443.09"/>	<input type="text" value="747443.09"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

DENALI LEADERSHIP PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

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).....	20300.00	20300.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20300.00	20300.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	58000.00	58000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	78300.00	78300.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	78300.00	78300.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	78300.00	78300.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	88938.02	88938.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	88938.02	88938.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	15000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	250.00	250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	104188.02	104188.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	104188.02	104188.02

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	78300.00	78300.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	78300.00	78300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	88938.02	88938.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	88938.02	88938.02

# 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 22  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**DENALI LEADERSHIP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AGUA CALIENTE BAND OF CAHUILLA INDIANS**

Mailing Address 5401 DINAH SHORE DRIVE

City PALM SPRINGS	State CA	Zip Code 92264
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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 ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2024

**Transaction ID : AB020E4B8E6B841CFA04**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AK-CHIN INDIAN COMMUNITY**

Mailing Address 42507 WEST PETERS & NALL RD

City MARICOPA	State AZ	Zip Code 85138
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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 ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 02 / 2024

**Transaction ID : A0C7A197FF0FF4559AAD**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HOON, PHILIP, , ,**

Mailing Address 3113 DROGUE COURT

City ANNAPOLIS	State MD	Zip Code 21403-4328
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
 CAPITOL 6 ADVISORS VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2024

**Transaction ID : A961C73D66B0143CEBE0**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> 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 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**DENALI LEADERSHIP PAC**

**A. JONES, G., BRADFORD, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11601 WILSHIRE BLVD  
 SUITE 546  
 City LOS ANGELES State CA Zip Code 90025-0509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REDPOINT VENTURES Occupation (for Individual) VENTURE CAPITALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 16 / 2024  
**Transaction ID : A5AA63AE50A8D4746B24**  
 Amount of Each Receipt this Period  
 3300.00  
 Memo Item  
**CONTRIBUTION**

**B. MURPHY, MARK, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 2484  
 City ROSWELL State NM Zip Code 88202-2484  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2024  
**Transaction ID : AFA856625A2C344CD91E**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. O'KELLY, SEBASTIAN, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9312 ELMHIRST DR.  
 City BETHESDA State MD Zip Code 20814-3953  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROBERTSON MONAGLE & EASTAUGH Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2024  
**Transaction ID : A90DA0CB22F9E402490C**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6800.00
<b>TOTAL</b> 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 22
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**DENALI LEADERSHIP PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
THOMAS, ROBERT, , ,

Mailing Address 1516 S. BOSTON AVENUE  
SUITE 301

City TULSA State OK Zip Code 74119-4019

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

Name of Employer (for Individual) SENIOR STAR Occupation (for Individual) CO-OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 26 / 2024

Transaction ID : **AB66145DDBBE649FAB2F**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**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  
MM / DD / YYYY

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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	20300.00



**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 22
<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)  
**DENALI LEADERSHIP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. AIR LINE PILOTS ASSOCIATION PAC</b>		Date of Receipt
Mailing Address 7950 JONES BRANCH DRIVE 400S		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2024"/>
City MCLEAN	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00035451"/>		<b>Transaction ID : A5849A5600CC6472B8E6</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>CONTRIBUTION</b>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ATN INTERNATIONAL, INC. PAC</b>		Date of Receipt
Mailing Address 500 CUMMINGS CTR		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2024"/>
City BEVERLY	State MA	Zip Code 01915-6142
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00494526"/>		<b>Transaction ID : A5712CA9EAAF1481DB08</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>CONTRIBUTION</b>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BASF CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE</b>		Date of Receipt
Mailing Address 1350 I ST NW		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2024"/>
City WASHINGTON	State DC	Zip Code 20005-3305
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00340075"/>		<b>Transaction ID : A7A49B7A6301F49F19EF</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>CONTRIBUTION</b>
Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="8500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

# 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 22
<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)  
**DENALI LEADERSHIP PAC**

**A. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC**

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

Mailing Address 1310 G STREET NW

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00194746

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2024

**Transaction ID : A86830879DAF84838B77**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. CHUGACH ALASKA CORPORATION PAC (CAC PAC)**

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

Mailing Address 3800 CENTERPOINT DRIVE  
SUITE 1200

City ANCHORAGE	State AK	Zip Code 99503
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FEC ID number of contributing federal political committee. **C** C00564377

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2024

**Transaction ID : AC7057C1E1385422AB9B**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. DISCOVER FINANCIAL SERVICES POLITICAL ACTION COMMITTEE**

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

Mailing Address 500 8TH STREET NW  
SUITE 210

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00438051

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	/	29	/	2024

**Transaction ID : A93F63A24E03A4986B9E**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
<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)  
**DENALI LEADERSHIP PAC**

**A. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042
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FEC ID number of contributing federal political committee. **C** C00088591

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	/	29	/	2024

**Transaction ID : A7547A855C5A6436CBD8**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 57189

City WASHINGTON	State DC	Zip Code 20037
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FEC ID number of contributing federal political committee. **C** C00121368

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	/	29	/	2024

**Transaction ID : AEB3C8B1EB8BB41FD9E9**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. GCI COMMUNICATION CORP. PAC (GCI PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1900 L STREET, NW  
SUITE 700

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00387894

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	/	29	/	2024

**Transaction ID : A62C5A3E07BC24B44BF7**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 22
<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)  
**DENALI LEADERSHIP PAC**

**A. INDEPENDENT COMMUNITY BANKERS OF AMERICA PAC**

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

Mailing Address 1615 L ST NW  
STE 900

City WASHINGTON State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 28 / 2024  
**Transaction ID : A9A25EB886EC24F70977**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING PAC**

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

Mailing Address 1900 K ST NW

City WASHINGTON State DC Zip Code 20006-1110

FEC ID number of contributing federal political committee. **C** C00084491

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 18 / 2024  
**Transaction ID : AA8E2549012CA4319B59**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

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

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 18 / 2024  
**Transaction ID : AA6E7F5F5908D40B492A**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 22
<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)  
**DENALI LEADERSHIP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SOUTHERN COMPANY EMPLOYEES PAC**

Mailing Address **241 RALPH MCGILL BOULEVARD NE  
BIN 10111**

City **ATLANTA** State **GA** Zip Code **30308**

FEC ID number of contributing federal political committee. **C C00144774**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3000.00**

Date of Receipt  
**03 / 18 / 2024**

**Transaction ID : AB04DF4D5A7B546E08D7**

Amount of Each Receipt this Period  
**3000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICA**

Mailing Address **4301 WILSON BOULEVARD**

City **ARLINGTON** State **VA** Zip Code **22203**

FEC ID number of contributing federal political committee. **C C00002972**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**02 / 12 / 2024**

**Transaction ID : A4B4295825A394DA4BAA**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TOYOTA MOTOR NORTH AMERICA, INC POLITICAL ACTION COMMITTEE (TOYOTA/LEXUS PAC)**

Mailing Address **325 7TH STREET, NW, SUITE 1000**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00542365**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**03 / 26 / 2024**

**Transaction ID : AE84D522006CD48FF8CC**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **9000.00**

**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 14 OF 22  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**DENALI LEADERSHIP PAC**

**A. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

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

Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 440

City WASHINGTON State DC Zip Code 20004-2505

FEC ID number of contributing federal political committee. **C** C00010470

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 29 / 2024

**Transaction ID : A462607BDE3054B1A973**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. WONDER WOMEN PAC**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00787002

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2024

**Transaction ID : A832F7E110D9B4FF690F**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	58000.00

**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)  
**DENALI LEADERSHIP PAC**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST.  
STE. 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 01 / 03 / 2024

FEC Identification Number C

Transaction ID : BE76B0DDAI

Amount of Each Disbursement this Period 200.60

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST.  
STE. 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 04 / 2024

FEC Identification Number C

Transaction ID : BAD1E2C977

Amount of Each Disbursement this Period 200.30

Memo Item

**C. ARISTOTLE INTERNATIONAL, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 716045

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 01 / 26 / 2024

FEC Identification Number C

Transaction ID : B8395809EE

Amount of Each Disbursement this Period 450.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 850.90

**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)

**DENALI LEADERSHIP PAC**

Full Name (Last, First, Middle Initial)

**A. KOCH & HOOS, LLC**

Mailing Address 901 N WASHINGTON ST  
STE. 700

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
ACCOUNTING/COMPLIANCE SERVICES

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 24 / 2024

FEC Identification Number

C [Redacted]

Transaction ID : B6F85FA660

Amount of Each Disbursement this Period

[Redacted] 1259.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. KOCH & HOOS, LLC**

Mailing Address 901 N WASHINGTON ST  
STE. 700

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
ACCOUNTING/COMPLIANCE SERVICES

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2024

FEC Identification Number

C [Redacted]

Transaction ID : BFFD801869E

Amount of Each Disbursement this Period

[Redacted] 1275.54

Memo Item

Full Name (Last, First, Middle Initial)

**C. KOCH & HOOS, LLC**

Mailing Address 901 N WASHINGTON ST  
STE. 700

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
ACCOUNTING/COMPLIANCE SERVICES

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2024

FEC Identification Number

C [Redacted]

Transaction ID : B88DC355FE

Amount of Each Disbursement this Period

[Redacted] 1513.60

Memo Item

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

[Redacted] 4048.34

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

[Redacted]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DENALI LEADERSHIP PAC**

Full Name (Last, First, Middle Initial)

**A. ST. REGIS DEER VALLEY**

Mailing Address 2300 DEER VALLEY DR. E

City  
PARK CITY

State  
UT

Zip Code  
84060

Purpose of Disbursement  
EVENT EXPENSE: LODGING/CATERING

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	2	4

FEC Identification Number

**C** Transaction ID : B77D12CB85

Amount of Each Disbursement this Period

22928.93

Memo Item

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY LLC**

Mailing Address 2311 WILSON BLVD  
STE 200

City  
ARLINGTON

State  
VA

Zip Code  
22201-5420

Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	2	4

FEC Identification Number

**C** Transaction ID : BCC2528FB9

Amount of Each Disbursement this Period

8395.45

Memo Item

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY LLC**

Mailing Address 2311 WILSON BLVD  
STE 200

City  
ARLINGTON

State  
VA

Zip Code  
22201-5420

Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	2	4

FEC Identification Number

**C** Transaction ID : BF41F6F6C7

Amount of Each Disbursement this Period

2650.00

Memo Item

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

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

33974.38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**DENALI LEADERSHIP PAC**

**A. TARGETED VICTORY LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 2311 WILSON BLVD  
STE 200

City ARLINGTON State VA Zip Code 22201-5420

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 14 / 2024

FEC Identification Number: C

**Transaction ID : B411C78849f**

Amount of Each Disbursement this Period: 2656.20

Memo Item

**B. THE ENDICOTT GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 124 16TH STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2024

FEC Identification Number: C

**Transaction ID : B87E5035395**

Amount of Each Disbursement this Period: 6000.00

Memo Item

**C. THE ENDICOTT GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 124 16TH STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FOOD & BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2024

FEC Identification Number: C

**Transaction ID : B985153B84:**

Amount of Each Disbursement this Period: 79.98

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8736.18

**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)

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

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NAME OF COMMITTEE (In Full)
DENALI LEADERSHIP PAC

Form A: THE ENDICOTT GROUP. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (FUNDRAISING CONSULTING), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/26/2024), FEC Identification Number, Transaction ID (B3F45751EA), and Amount of Each Disbursement (6000.00).

Form B: THE ENDICOTT GROUP. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (EVENT DEPOSIT), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/08/2024), FEC Identification Number, Transaction ID (B90E390EDE), and Amount of Each Disbursement (250.00).

Form C: THE ENDICOTT GROUP. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (FUNDRAISING CONSULTING), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/29/2024), FEC Identification Number, Transaction ID (B89E5892C9), and Amount of Each Disbursement (12660.22).

SUBTOTAL of Disbursements This Page (optional) 18910.22
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DENALI LEADERSHIP PAC**

Full Name (Last, First, Middle Initial)

**A. THE ENDICOTT GROUP**

Mailing Address 124 16TH STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C  
**Transaction ID : B6947FD869f**

Amount of Each Disbursement this Period

3500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VP STRATEGIES**

Mailing Address PO BOX 65192

City  
WASHINGTON

State  
DC

Zip Code  
20035

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	2	4

FEC Identification Number

C  
**Transaction ID : B092987C9Ae**

Amount of Each Disbursement this Period

13804.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. VP STRATEGIES**

Mailing Address PO BOX 65192

City  
WASHINGTON

State  
DC

Zip Code  
20035

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	2	4

FEC Identification Number

C  
**Transaction ID : BD548F3D68**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

22304.00

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

88824.02

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-28a, 22-28b, 23-28c, 26-29, 27-30b with checkboxes.

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NAME OF COMMITTEE (In Full)
DENALI LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. HOGAN FOR MARYLAND INC.

Mailing Address 2077 SOMERVILLE RD
STE 206

City ANNAPOLIS State MD Zip Code 21401-4178

Purpose of Disbursement CONTRIBUTION Category/Type 011

Candidate Name HOGAN, LARRY, , ,

Office Sought: Senate Disbursement For: 2024 Primary General
State: MD District:

Date of Disbursement 02 / 21 / 2024

FEC Identification Number C00869016
Transaction ID : B7E248040D/
Amount of Each Disbursement this Period 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOGAN FOR MARYLAND INC.

Mailing Address 2077 SOMERVILLE RD
STE 206

City ANNAPOLIS State MD Zip Code 21401-4178

Purpose of Disbursement CONTRIBUTION Category/Type 011

Candidate Name HOGAN, LARRY, , ,

Office Sought: Senate Disbursement For: 2024 Primary General
State: MD District:

Date of Disbursement 02 / 21 / 2024

FEC Identification Number C00869016
Transaction ID : B283CE3AB0
Amount of Each Disbursement this Period 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NIKKI HALEY FOR PRESIDENT INC.

Mailing Address 186 SEVEN FARMS DR
STE F

City DANIEL ISLAND State SC Zip Code 29492-8522

Purpose of Disbursement CONTRIBUTION Category/Type 011

Candidate Name HALEY, NIKKI, , ,

Office Sought: President Disbursement For: 2024 Primary General
State: DC District:

Date of Disbursement 02 / 21 / 2024

FEC Identification Number C00833392
Transaction ID : B89D6B2E57
Amount of Each Disbursement this Period 5000.00

Memo Item

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

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

15000.00
15000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DENALI LEADERSHIP PAC**

Full Name (Last, First, Middle Initial)

### A. CENTRAL WYOMING HOSPICE & TRANSITIONS

Mailing Address 319 S WILSON ST

City  
CASPER

State  
WY

Zip Code  
82601-2943

Purpose of Disbursement  
CHARITABLE DONATION

012

Category/  
Type

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 Y
02	/	02	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : B90D8E120E

Amount of Each Disbursement this Period

250.00
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Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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 Y
	/		/	

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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 Y
	/		/	

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

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Memo Item

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

250.00
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**TOTAL** This Period (last page this line number only)..... ▶

250.00
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