



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Innovation Political Action Committee**

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="2020"/>	<input type="text" value=""/>	<input type="text" value="418649.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="340727.71"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="132578.54"/>	<input type="text" value="293328.54"/>
(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="473306.25"/>	<input type="text" value="711977.91"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="59316.61"/>	<input type="text" value="297988.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="413989.64"/>	<input type="text" value="413989.64"/>
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:**  
  
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

**Innovation Political Action Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y Y 06 / 01 / 2020 To: M M / D D / Y Y Y Y Y 06 / 30 / 2020

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).....	37800.00	92550.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	37800.00	92550.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	67500.00	152500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	105300.00	245050.00
12. Transfers From Affiliated/Other Party Committees.....	27278.54	48278.54
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)).....▶	132578.54	293328.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	132578.54	293328.54

**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 .....	9316.61	106488.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9316.61	106488.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	191500.00
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)) ..	59316.61	297988.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59316.61	297988.27

**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) .....	105300.00	245050.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	105300.00	245050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	9316.61	106488.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9316.61	106488.27

**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 26  
(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)  
**Innovation Political Action Committee**

**A. ANDERSON, JOHN, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 E. MASONIC VIEW AVE.  
 City ALEXANDRIA State VA Zip Code 22301-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RFA Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 01 / 2020  
**Transaction ID : SA11A.25035**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**B. BOEHLY, TODD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 865 HOLLOW TREE RIDGE  
 City DARIEN State CT Zip Code 06820-2006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ELDRIDGE INDUSTRIES Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11A.25229**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item CONTRIBUTION

**C. CHADWICK, KIRSTEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 PRESIDENT FORD LANE  
 City ALEXANDRIA State VA Zip Code 22302-3033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FIERCE GOVERNMENT RELATIONS Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11A.25226**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7800.00  
**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 7 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

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

Mailing Address 48 DRUM AND HAMMER RD.

City TAYLORSVILLE    State NC    Zip Code 28681-8248

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS  
Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2020

**Transaction ID : SA11A.25216**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HENDRIX, JOSHUA, , ,**

Mailing Address 567 CORNERSTONE DR.

City TAYLORSVILLE    State NC    Zip Code 28681-4342

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS  
Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2020

**Transaction ID : SA11A.25219**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 312 N FAIRFAX STREET

City ALEXANDRIA    State VA    Zip Code 22314-2652

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

Name of Employer (for Individual) CONSUMER BANKERS ASSOCIATION  
Occupation (for Individual) PRESIDENT & CEO

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  
 06 / 26 / 2020

**Transaction ID : SA11A.25227**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12500.00

**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 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. JOHNSON, TRAVIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5640 19TH STREET NORTH  
 City ARLINGTON State VA Zip Code 22205-3152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1607 STRATEGIES Occupation (for Individual) GOVERNMENT AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 29 / 2020  
**Transaction ID : SA11A.25228**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**B. KUYKENDALL, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 427 PLAYERS RIDGE RD.  
 City HICKORY State NC Zip Code 28601-8842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11A.25218**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**C. NAGRO, LOUIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 KNOB HILL RD.  
 City TAYLORSVILLE State NC Zip Code 28681-7737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11A.25215**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<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 9 OF 26
(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)  
**Innovation Political Action Committee**

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

Mailing Address **118 FLORENCE RD.**

City <b>STATESVILLE</b>	State <b>NC</b>	Zip Code <b>28625-4710</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation (for Individual) <b>INFORMATION REQUESTED PER BE</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

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

Date of Receipt  
**06 / 30 / 2020**

**Transaction ID : SA11A.25217**

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>37800.00</b>

**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 26
<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)  
**Innovation Political Action Committee**

**A. SCALISE FOR CONGRESS**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 23219

City JEFFERSON	State LA	Zip Code 70183-0219
FEC ID number of contributing federal political committee. <b>C</b> C00394957		
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  
MM / DD / YYYY  
06 / 30 / 2020  
**Transaction ID : SA11C.25225**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. AVIENT CORP. POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 33587 WALKER ROAD

City AVON LAKE	State OH	Zip Code 44012-1145
FEC ID number of contributing federal political committee. <b>C</b> C00288712		
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 ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2020  
**Transaction ID : SA11C.25206**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C. CITIGROUP INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1101 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20004-2514
FEC ID number of contributing federal political committee. <b>C</b> C00008474		
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  
MM / DD / YYYY  
06 / 25 / 2020  
**Transaction ID : SA11C.25208**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<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 26
<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)  
**Innovation Political Action Committee**

**A. CME GROUP INC. PAC**

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

Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606-7431
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076299

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2020

**Transaction ID : SA11C.25207**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DTCC PAC**

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

Mailing Address 1455 PENNSYLVANIA AVE., NW  
SUITE 725

City WASHINGTON	State DC	Zip Code 20004-1036
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FEC ID number of contributing federal political committee. **C** C00497917

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11C.25222**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)**

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

Mailing Address 82 DEVONSHIRE STREET  
N5A

City BOSTON	State MA	Zip Code 02109-3605
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FEC ID number of contributing federal political committee. **C** C00380550

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2020

**Transaction ID : SA11C.25212**

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 26
<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)  
**Innovation Political Action Committee**

**A. GLAXOSMITHKLINE LLC PAC (GSK PAC)**

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

Mailing Address FIVE MOORE DRIVE  
P.O. BOX 13358

City RESEARCH TRIANGLE State NC Zip Code 27709-0143

FEC ID number of contributing federal political committee. **C** C00199703

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  
06 / 09 / 2020

**Transaction ID : SA11C.24996**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. GLAXOSMITHKLINE LLC PAC (GSK PAC)**

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

Mailing Address FIVE MOORE DRIVE  
P.O. BOX 13358

City RESEARCH TRIANGLE State NC Zip Code 27709-0143

FEC ID number of contributing federal political committee. **C** C00199703

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  
06 / 29 / 2020

**Transaction ID : SA11C.25211**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLI**

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

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON State DC Zip Code 20001-6707

FEC ID number of contributing federal political committee. **C** C00022343

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2020

**Transaction ID : SA11C.25213**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<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 26
<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)  
**Innovation Political Action Committee**

**A. MORGAN STANLEY POLITICAL ACTION COMMITTEE**

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

Mailing Address 1585 BROADWAY 39TH FLOOR

City NEW YORK	State NY	Zip Code 10036-8200
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00337626

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11C.25220**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. NATIONAL ASSOCIATION OF BROADCASTERS PAC**

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

Mailing Address 1771 N STREET NW

City WASHINGTON	State DC	Zip Code 20036-2800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00009985

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2020

**Transaction ID : SA11C.25209**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

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

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2020

**Transaction ID : SA11C.25214**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<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 14 OF 26
<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)  
**Innovation Political Action Committee**

**A. NAVIENT CORPORATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 EDMUND HALLEY DRIVE

City RESTON	State VA	Zip Code 20191-1132
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00331835

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 30 / 2020  
**Transaction ID : SA11C.25223**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. ROCK HOLDINGS INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 S. WASHINGTON SQ.  
SUITE 300

City LANSING	State MI	Zip Code 48933-1732
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00388827

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 29 / 2020  
**Transaction ID : SA11C.25210**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. THE CAPITAL GROUP COMPANIES INC POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 SOUTH HOPE STREET

City LOS ANGELES	State CA	Zip Code 90071-1406
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00540518

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 18 / 2020  
**Transaction ID : SA11C.25230**

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 15 OF 26
<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)  
**Innovation Political Action Committee**

**A. THE HOME DEPOT PAC**

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

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 ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020

**Transaction ID : SA11C.25224**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. TRUIST FINANCIAL CORPORATION FEDERAL PAC (FORMERLY SUNTRUST)**

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

Mailing Address 1001 SEMMES AVENUE 5TH FLOOR

City RICHMOND State VA Zip Code 23224-2245

FEC ID number of contributing federal political committee. **C** C00386524

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  
06 / 30 / 2020

**Transaction ID : SA11C.25221**

Amount of Each Receipt this Period  
5000.00

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).....▶	67500.00

**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 16 OF 26
<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)  
**Innovation Political Action Committee**

**A. TEAM MCHENRY**

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

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00544650

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
48278.54

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA12.25231**

Amount of Each Receipt this Period  
27278.54

Memo Item  
TRANSFER

DISTRIBUTION OF NET JFC PROCEEDS

**B. BENJAMIN, PAUL, , ,**

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

Mailing Address 601 AMALFI DR

City PACIFIC PALISADES	State CA	Zip Code 90272-4507
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
CAPITAL GROUP INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2020

**Transaction ID : SA.25006.3.0620**

Amount of Each Receipt this Period  
2600.00

Memo Item  
TRANSFER

TRANSFER FROM TEAM MCHENRY

**C. BUCHANAN, DEE, , ,**

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

Mailing Address 2604 VALLEY DRIVE

City ALEXANDRIA	State VA	Zip Code 22302-2843
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
OGILVY GOVERNMENT RELATIONS PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2020

**Transaction ID : SA.25034.3.0620**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM TEAM MCHENRY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	27278.54
<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 17 OF 26
<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)  
**Innovation Political Action Committee**

**A. DE TOLEDO, PHILIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3611 LONGRIDGE AVE  
 City SHERMAN OAKS State CA Zip Code 91423-4917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITAL GROUP Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 06 / 09 / 2020  
**Transaction ID : SA.25004.3.0620**  
 Amount of Each Receipt this Period 2600.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**B. DIMAROB, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 WEST DEL RAY AVE  
 City ALEXANDRIA State VA Zip Code 22301-1524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALTRIA Occupation (for Individual) SR. DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 06 / 11 / 2020  
**Transaction ID : SA.25002.3.0620**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**C. EMERSON, MARLENE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 WOODWARD AVE.  
 City DETROIT State MI Zip Code 48226-1906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 18 / 2020  
**Transaction ID : SA.25105.3.0620**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 26
<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)  
**Innovation Political Action Committee**

**A. EMERSON, WILLIAM, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 WOODWARD AVE.  
 City DETROIT State MI Zip Code 48226-1906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROCK HOLDINGS Occupation (for Individual) VICE CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 18 / 2020  
**Transaction ID : SA.25104.3.0620**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**B. KERN, R, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3840 CLAYTON STREET  
 City SAN FRANCISCO State CA Zip Code 94118-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITAL GROUP Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 06 / 10 / 2020  
**Transaction ID : SA.25003.3.0620**  
 Amount of Each Receipt this Period 2600.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**C. KING, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 175 HUGUENOT ST. PH102  
 City NEW ROCHELLE State NY Zip Code 10801-7754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE CAPITAL GROUP COMPANIES Occupation (for Individual) SENIOR VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA.25112.3.0620**  
 Amount of Each Receipt this Period 2600.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 26
<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)  
**Innovation Political Action Committee**

**A. WOLF, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3215 TOPPING ROAD  
 City MADISON State WI Zip Code 53705-1434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITAL GROUP Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 06 / 09 / 2020  
**Transaction ID : SA.25005.3.0620**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**B. MORTGAGE BANKERS ASSOCIATION OF AMERICA PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1919 PENNSYLVANIA AVENUE NW  
 City WASHINGTON State DC Zip Code 20006-3404  
 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 03 / 31 / 2020  
**Transaction ID : SA.24949.3.0620**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	27278.54

**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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 84314  
SUITE 2105

City  
BATON ROUGE

State  
LA

Zip Code  
70884-1821

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1560  
Amount of Each Disbursement this Period

[REDACTED] 94.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address PO BOX 84314  
SUITE 2105

City  
BATON ROUGE

State  
LA

Zip Code  
70884-1821

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1560  
Amount of Each Disbursement this Period

[REDACTED] 387.45

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL RD., STE. 400

City  
TYSONS CORNER

State  
VA

Zip Code  
22182

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1560  
Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

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

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

[REDACTED] 731.50

[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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HUCKABY DAVIS LISKER**

Mailing Address 228 S WASHINGTON STREET STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2020

FEC Identification Number

C  
**Transaction ID : SB21B.I15613**  
Amount of Each Disbursement this Period  
1585.11

Memo Item

Full Name (Last, First, Middle Initial)

**B. OORBEEK MEMMOTT GROUP**

Mailing Address 9593 SPRINGS RD.

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2020

FEC Identification Number

C  
**Transaction ID : SB21B.I15613**  
Amount of Each Disbursement this Period  
7000.00

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  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

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)..... ▶

8585.11  
9316.61



**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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. CAWTHORN FOR NC</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2020
Mailing Address 638 SPARTANBURG HWY, STE 70 #362		FEC Identification Number C 000732958 <b>Transaction ID : SB23.I15608</b>
City HENDERSONVILLE	State NC	Zip Code 28792
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>CAWTHORN, DAVID, MADISON, ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NC	District: 11	

Full Name (Last, First, Middle Initial) <b>B. DAVIDSON FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2020
Mailing Address 1790 GREENBRIAR DR		FEC Identification Number C 000600718 <b>Transaction ID : SB23.I15610</b>
City TROY	State OH	Zip Code 45373
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>DAVIDSON, WARREN, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OH	District: 08	

Full Name (Last, First, Middle Initial) <b>C. ELISE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2020
Mailing Address P.O. BOX 338		FEC Identification Number C 000547893 <b>Transaction ID : SB23.I15621</b>
City WILLSBORO	State NY	Zip Code 12996
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>STEFANIK, ELISE, M., ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 21	

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. STEIL FOR WISCONSIN, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	19	/	2020

Mailing Address 3709 BRIAR CREST DRIVE

FEC Identification Number

**C** C00677286

**Transaction ID : SB23.I15614**

Amount of Each Disbursement this Period

5000.00

Memo Item

City JANESVILLE State WI Zip Code 53546

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

**STEIL, BRYAN , GEORGE , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: WI District: 01

Full Name (Last, First, Middle Initial)

**B. VERN BUCHANAN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	19	/	2020

Mailing Address P.O. BOX 48928

FEC Identification Number

**C** C00412759

**Transaction ID : SB23.I15615**

Amount of Each Disbursement this Period

5000.00

Memo Item

City SARASOTA State FL Zip Code 34230

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

**BUCHANAN, VERNON , , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: FL District: 16

Full Name (Last, First, Middle Initial)

**C. VICKY HARTZLER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	19	/	2020

Mailing Address PO BOX 531

FEC Identification Number

**C** C00464602

**Transaction ID : SB23.I15616**

Amount of Each Disbursement this Period

2500.00

Memo Item

City HARRISONVILLE State MO Zip Code 64701-0531

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

**HARTZLER, VICKY , , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: MO District: 04

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

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

12500.00



**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)  
**Innovation Political Action Committee**

**A. VOTETIPTON.COM**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 1582

City: CORTEZ State: CO Zip Code: 81321

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: **TIPTON, SCOTT, R., MR.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: CO District: 03

Date of Disbursement: 06 / 03 / 2020

FEC Identification Number: **C00470757**  
Transaction ID : **SB23.I15617**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. VOTETIPTON.COM**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 1582

City: CORTEZ State: CO Zip Code: 81321

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: **TIPTON, SCOTT, R., MR.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: CO District: 03

Date of Disbursement: 06 / 03 / 2020

FEC Identification Number: **C00470757**  
Transaction ID : **SB23.I15618**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. YOUNG FOR IOWA, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 162

City: VAN METER State: IA Zip Code: 50261

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: **YOUNG, DAVID, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: IA District: 03

Date of Disbursement: 06 / 19 / 2020

FEC Identification Number: **C00545616**  
Transaction ID : **SB23.I15619**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10000.00

**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)  
**Innovation Political Action Committee**

**A. CMR POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152

Purpose of Disbursement VOID CHECK ISSUED 7/9/19

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 06 / 02 / 2020

FEC Identification Number: C00469429  
**Transaction ID : SB23.I15620**

Amount of Each Disbursement this Period: - 2500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ - 2500.00

**TOTAL** This Period (last page this line number only)..... ▶ 50000.00