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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Aut	nonzed Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Family Policy PAC			
ADDRESS (number and street)	8675 Explorer Drive		
▼ Check if different	Suite 112		
than previously reported. (ACC)	Colorado Springs		CO 80920 -
2. FEC IDENTIFICATION N	UMBER ▼ CIT	ГУ 🛦	STATE ▲ ZIP CODE ▲
C C00595686		S THIS NEW (N) OI	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:	Mar	7 20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15 Quarterly Report (0		20 (M4) Jul 20 (M7	Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (0	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y	YE) Election	on on	in the State of
July 31 Mid-Year Report (Non-electic Year Only) (MY)	POST-Election Report for the:	✗ General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on 11 03	in the State of
5. Covering Period 10		through 11	M / D D / Y Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z Z Z Z
I certify that I have examined th	his Report and to the best of Mathis, Larry, , ,	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure			
Signature of Treasurer	his, Larry, , ,	[Electronically Filed]	Date 12 / 19 / 2020
NOTE: Submission of false, erron	neous, or incomplete informatio	n may subject the person signin	g this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Family Policy PAC 10 01 2020 11 23 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 428.00 January 1, 2020 (b) Cash on Hand at 428.00 Beginning of Reporting Period..... 0.00 0.00 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 428.00 428.00 6(a) and 6(c) for Column B)..... 0.00 0.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 428.00 428.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 3958.71 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

	Fami	y Po	olicy	PAC
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R	eport Covering the Period: From:		o: 11 23 2020
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	() 1101111204 (400 001104410 1),11111111111		
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	0.00	0.00
	Ē		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	0.00	0.00
,	Totals to Line 33, page 5)	0.00	0.00
۲.	Transfers From Affiliated/Other	0.00	0.00
	Party Committees	0.00	0.00
ł	All Loans Received	0.00	0.00
•	7 III Eddilo 1 Iodol Vod	4 4	4 4
	Lean Denouments Descived	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	3.00
).	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	0.00	0.00
3	Refunds of Contributions Made	45	7 7
•	to Federal Candidates and Other		
	Political Committees	0.00	0.00
·.	Other Federal Receipts	4 4	4 4
	(Dividends, Interest, etc.)	0.00	0.00
	Transfers from Non-Federal and Levin Funds	4 4	4 4
	(a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
	=		
	(b) Levin Funds (from Schedule H5)	0.00	0.00
			7 7 7
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
			7 7
	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00
	_	7 7	
	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)▶	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Suisingai Tour to Butte
(i) Federal Share	0.00	0.00
(ii) New Federal Chare	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	0.00	0.00
(c) Total Operating Expenditures	1 1 1 1 1 1 1 1 1 1	
(add 21(a)(i), (a)(ii), and (b))	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	4 4 4	
and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4	4 4
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Louis riopaymento intado	4	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees		
man Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	7 7 7	1 1 1 1 1 1 1 1 1
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
(444 21100 25(4), (2), 414 (0),	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(20))	
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(i) I sucrai share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1
Entirely With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
,	7 7 7	4 4
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	0.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 0.00 0.00 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 0.00 0.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 0.00 0.00 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 0.00 0.00 (subtract Line 37 from Line 36)

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F3XA Transaction ID:

This Amended Post-General Report is being filed by Family Policy PAC in response to the RFAI on 12/18/20 notifying the committee that it may have failed to file its Post-General Report and references a period from 10/1/20 to 10/14/20. The committee timely filed a Post-General Report on 11/28/20. However, that report incorrectly listed the beginning of its coverage period as 10/15/20, not 10/1/20. In listing the beginning of the coverage period as 10/15/20 rather than 10/1/20, the committee relied on the chart in the FEC's web page titled 'Pre- and Post-General Reports (2020).' That chart lists the coverage period for a Post-General Report as being from 10/15/20 to 11/23/20 although it also notes in its text that Post-General Reports 'include all activity from the close of books on the committee's last report through 20 days after the election.' As the close of books on Family Policy PAC's last report was 9/30/20, the correct coverage period for the committee's Post-General Report began on 10/1/20. The committee's Post-General Report is being amended accordingly. As both the original and amended Post-General Reports indicate, the committee had no activity during the coverage period for this report.

Form/Schedule: Transaction ID:

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 7 OF
FOR LINE NUMBER:
(check only one)

	9
¥	10

NAME OF COMMITTEE (In Full) Family Policy PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Bank fees Family Policy Alliance Mailing Address 8655 Explorer Drive State Zip Code Colorado Springs CO 80920 Transaction ID: SD10.4122 Outstanding Balance Beginning This Period 13.91 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 13.91 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Bank fees Family Policy Alliance Mailing Address 8655 Explorer Drive City State Zip Code Colorado Springs 80920 CO Outstanding Balance Beginning This Period Transaction ID: SD10.4123 74.15 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 74.15 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Bank fees Family Policy Alliance Mailing Address 8655 Explorer Drive City State Zip Code Colorado Springs CO 80920 Outstanding Balance Beginning This Period Transaction ID: SD10.4124 73.65 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 73.65 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 8 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

NAME OF COMMITTEE (In Full) Family Policy PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal fees Family Policy Alliance Mailing Address 8655 Explorer Drive State Zip Code Colorado Springs CO 80920 Transaction ID: SD10.4125 Outstanding Balance Beginning This Period 1592.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1592.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal fees Family Policy Alliance Mailing Address 8655 Explorer Drive City State Zip Code Colorado Springs 80920 CO Outstanding Balance Beginning This Period Transaction ID: SD10.4126 1531.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1531.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Bank fees Family Policy Alliance Mailing Address 8655 Explorer Drive City State Zip Code Colorado Springs CO 80920 Outstanding Balance Beginning This Period Transaction ID: SD10.4127 247.06 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 247.06 0.00 3370.56 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 9 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

NAME OF COMMITTEE (In Full) Family Policy PAC				
A. Full Name (Last, First, Middle Initial) of Debte Family Policy Alliance	Nature of Debt (Purpose): Wages			
Mailing Address 8655 Explorer Drive	Mailing Address 8655 Explorer Drive			
City Colorado Springs	State Zip Code corado Springs CO 80920			
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period			
Amount Incurred This Period	Amount Incurred This Period Payment This Period		Outstanding Balance at Close of This Period	
0.00		0.00	410.34	
B. Full Name (Last, First, Middle Initial) of Debto Family Policy Alliance	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Family Policy Alliance			
Mailing Address 8655 Explorer Drive				
City Colorado Springs	State CO	Zip Code 80920		
Outstanding Balance Beginning This Period 16.10				
Amount Incurred This Period 0.00			Outstanding Balance at Close of This Period 16.10	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address			Nature of Debt (Purpose):	
City	State	Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period	
1) SUBTOTALS This Period This Page (optional))	426.44	
2) TOTALS This Period (last page this line number	r only))	3958.71	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page o	nly)	0.00	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶			3958.71	