

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

National Association of Enrolled Agents Political Action Committee

ADDRESS (number and street) 1730 Rhode Island Avenue, NW
 Suite 400
 Washington DC 20036-3118

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00415372

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:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input checked="" type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

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

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 06 / 01 / 2021 through M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2021

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

Mason, David, , ,

Type or Print Name of Treasurer

Signature of Treasurer Mason, David, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2021

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Association of Enrolled Agents 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="2021"/>	<input type="text" value="134064.80"/>	<input type="text" value="134064.80"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="135202.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11781.09"/>	<input type="text" value="21031.09"/>
(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="146983.79"/>	<input type="text" value="155095.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9030.90"/>	<input type="text" value="17143.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="137952.89"/>	<input type="text" value="137952.89"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Write or Type Committee Name

National Association of Enrolled Agents Political Action Committee

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

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).....	10456.09	19256.09
(ii) Unitemized	1325.00	1775.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11781.09	21031.09
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11781.09	21031.09
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)).....▶	11781.09	21031.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	11781.09	21031.09

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	30.90	143.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	30.90	143.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	17000.00
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)) ..	9030.90	17143.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9030.90	17143.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11781.09	21031.09
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11781.09	21031.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	30.90	143.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30.90	143.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<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)
National Association of Enrolled Agents Political Action Committee

A. McCaughey, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1730 Rhode Island Ave NW
 Ste 400
 City Washington State DC Zip Code 20036-3118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Association of Enrolled Agent Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A264552C19C9F45BEB55
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Annouz, Talal, , Prof.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 Oakview Ct NW
 City Lilburn State GA Zip Code 30047-2628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T.Y.M.A.T. LLC Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A71647A2BBC54417D882
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Ryan, Edward, J., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Union Ave
 Ste 7
 City Rutherford State NJ Zip Code 07070-1273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ryan Financial Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A5CFC5CF454EA41E5A06
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
<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)
National Association of Enrolled Agents Political Action Committee

A. Coleman, Teresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 18013
 City Houston State TX Zip Code 77206-8013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Coleman Tax Service Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A4AB0B0D2A55D4239A84
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Antonelli, Bernadette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 764 Kearny Ave
 City Kearny State NJ Zip Code 07032-3145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Arlington Tax Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A648342C5F5624B17A92
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Nemeth, Bill, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3631 Chamblee Tucker Rd Ste A
 City Atlanta State GA Zip Code 30341-4415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tax Doctor Inc. Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1206.09

Date of Receipt 06 / 09 / 2021
Transaction ID : AB7A61E229A934970998
 Amount of Each Receipt this Period 206.09
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1456.09
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
<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)
National Association of Enrolled Agents Political Action Committee

A. Huntley, Robin, Rae, Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 Frandorson Cir
Ste 210

City Apollo Beach State FL Zip Code 33572-2691

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

Name of Employer (for Individual) Rae's Accounting LLC Occupation (for Individual) Enrolled Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AAF15B0C2D60D4621834

Amount of Each Receipt this Period 250.00

Memo Item

B. Huntley, Robin, Rae, Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 Frandorson Cir
Ste 210

City Apollo Beach State FL Zip Code 33572-2691

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

Name of Employer (for Individual) Rae's Accounting LLC Occupation (for Individual) Enrolled Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A810E75CC6C09414F8F2

Amount of Each Receipt this Period 250.00

Memo Item

C. Kidwell, Raymond, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28179 Vanderbilt Dr
Ste 2

City Bonita Springs State FL Zip Code 34134-7579

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

Name of Employer (for Individual) Kidwell & Associates Occupation (for Individual) Enrolled Agent

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AA2C326F9F1CC4BD4B1C

Amount of Each Receipt this Period 2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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 9 OF 14
<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)
National Association of Enrolled Agents Political Action Committee

A. Manuel, Anita, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Cocoonat Row
 Ste T-5
 City Palm Beach State FL Zip Code 33480-4069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Palm Beach Tax Group Inc. Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A2A42989D432345209E6
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Carlisle, Michael, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 N Macdill Ave
 City Tampa State FL Zip Code 33609-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alternative Tax Services Inc. Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A66B08E3D6E104A2EBF8
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Abercrombie, Waymon, Wray, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16115 SW 117th Ave
 Ste 25
 City Miami State FL Zip Code 33177-1621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Abercrombie Accounting Services Corp Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AB97AD97789284A2A8E6
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 10 OF 14
<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)
National Association of Enrolled Agents Political Action Committee

A. McMahon, Rosemary, Campoli, Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2345 NW Bay Colony Dr
 City Stuart State FL Zip Code 34994-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rosemary C McMahon LLC Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AB6A0B0F1EE554ADDBCI
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Jacobs, Lynn, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1702 Williams Blvd
 City Kenner State LA Zip Code 70062-6262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lynn Jacobs EA LLC Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AD4F3B26B88884C47809
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Nelson, Karin G, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 Avenue K SE
 City Winter Haven State FL Zip Code 33880-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Professional Tax Consultants Inc. Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A4B33C4C22B564A21999
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
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 11 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Enrolled Agents Political Action Committee

A. Leachmoore, Cynthia, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 Sunset Ln
 City Soquel State CA Zip Code 95073-9722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Soquel Tax Service Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : AD24B6E6695324572AF2
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Levno, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 N Argonne Rd Ste C
 City Spokane Valley State WA Zip Code 99212-2798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Levno & Company Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : AA769FECA3A75462794A
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Paoletti, Daniel, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 Park Ave
 City Binghamton State NY Zip Code 13903-3280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Integrity Tax Service Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A7BD578C10A9541F6B3C
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 14
<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)
National Association of Enrolled Agents Political Action Committee

A. Barker, Shelley, I.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Lamp Post Cir SE
 City Albuquerque State NM Zip Code 87123-4117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Barker & Associates Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A34A6F3D3DF4848CB9E0
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Midwood, Twila, Denton, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 Murrell Rd Ste E
 City Rockledge State FL Zip Code 32955-4752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Advanced Tax Centre Inc. Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AC381398D4389474BBC3
 Amount of Each Receipt this Period 700.00
 Memo Item

C. Kubey, Phyllis, Jo, Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 W 108th St Apt 8D1
 City New York State NY Zip Code 10025-2926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A8BBBB1804FD14F9AB11
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	10456.09

**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

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)

National Association of Enrolled Agents Political Action Committee

Full Name (Last, First, Middle Initial)

A. City National Bank

Mailing Address 2001 M St NW

City
Washington

State
DC

Zip Code
20036-7500

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : BE4E2B0460:

Amount of Each Disbursement this Period

[] 30.90

Memo Item

Full Name (Last, First, Middle Initial)

B.

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

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

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

[] 30.90

[] 30.90

**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)

National Association of Enrolled Agents Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wyden for Senate

Mailing Address PO Box 3498

City
Portland

State
OR

Zip Code
97208-3498

Purpose of Disbursement
Contribution to Committee

Candidate Name

Wyden, Ron, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: OR District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	3		2	0	2	1		

FEC Identification Number

C C00308676

Transaction ID : B414A9325B

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Grassley Committee, Inc.

Mailing Address 1020 North Fairfax Street
Suite 201

City
Alexandria

State
VA

Zip Code
22314-2068

Purpose of Disbursement
Contribution to Committee

Candidate Name

Grassley, Chuck, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: IA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	3		2	0	2	1		

FEC Identification Number

C C00230482

Transaction ID : BD5A45D26C

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAN KILDEE

Mailing Address 412 First St SE, Ste 100
c/o Molly Allen Associates

City
Washington

State
DC

Zip Code
20003-1804

Purpose of Disbursement
Contribution to Committee

Candidate Name

Kildee, Dan, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: MI District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	9		2	0	2	1		

FEC Identification Number

C C00499947

Transaction ID : BBCE271F9

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

9000.00

9000.00