

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

Making Americans Count PAC (MAC PAC)

ADDRESS (number and street) One Park Row, 5th Floor

Check if different than previously reported. (ACC) Providence RI 02903

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

C C00547448

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 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:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

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

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y 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 Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

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

Gerrity, Dan, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Gerrity, Dan, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y

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)

Page 2

Write or Type Committee Name

Making Americans Count PAC (MAC PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value=""/>	<input type="text" value="6581.46"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1358.01"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="35000.00"/>	<input type="text" value="35000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="36358.01"/>	<input type="text" value="41581.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30936.17"/>	<input type="text" value="36159.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5421.84"/>	<input type="text" value="5421.84"/>
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

Making Americans Count PAC (MAC PAC)

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).....	7500.00	7500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	7500.00	7500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	27500.00	27500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35000.00	35000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	35000.00	35000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	35000.00	35000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	19686.17	20409.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19686.17	20409.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	13500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	250.00	2250.00
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)) ..	30936.17	36159.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30936.17	36159.62

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)	35000.00	35000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35000.00	35000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19686.17	20409.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19686.17	20409.62

**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 18
<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

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)
Making Americans Count PAC (MAC PAC)

A. Means, James, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2451 N. Taylor Street
 City Arlington State VA Zip Code 22207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alpine Group Occupation (for Individual) Government Relation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 07 / 2019
Transaction ID : SA11AI.4428
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Terhune, Henry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 New Hampshire Ave NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Akin Gump Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2019
Transaction ID : SA11AI.4437
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Treanor, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1324 Cordelia Court
 City McLean State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Akin Gump Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2019
Transaction ID : SA11AI.4448
 Amount of Each Receipt this Period 1000.00
 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: PAGE 7 OF 18
(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)
Making Americans Count PAC (MAC PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Volpe, Charles, J., ,

Mailing Address 336 Oakford Road

City Clarks Summit	State PA	Zip Code 18411
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Foxco Insurance Management	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		27		2019

Transaction ID : SA11AI.4422

Amount of Each Receipt this Period
5000.00

Memo Item

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

M M	/	D D	/	Y Y Y Y

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

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	7500.00

**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 8 OF 18
<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)
Making Americans Count PAC (MAC PAC)

A. American Association for Justice Political Action Committee (AAJ PAC)

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

Mailing Address 777 6th Street, NW
Suite 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

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
12 / 23 / 2019

Transaction ID : SA11C.4475

Amount of Each Receipt this Period
5000.00

Memo Item

B. ARTICLE 1 POLITICAL ACTION COMMITTEE

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

Mailing Address 910 17TH STREET, NW
SUITE 925

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00461624

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2019

Transaction ID : SA11C.4477

Amount of Each Receipt this Period
2500.00

Memo Item

C. Comcast Corporation & NBCUniversal Political Action Committee - Federal

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

Mailing Address 1701 JFK Blvd
FI 49

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

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
09 / 18 / 2019

Transaction ID : SA11C.4425

Amount of Each Receipt this Period
5000.00

Memo Item

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: (check only one)	PAGE 9 OF 18
<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)
Making Americans Count PAC (MAC PAC)

A. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2019

Transaction ID : SA11C.4454

Amount of Each Receipt this Period
2500.00

Memo Item

B. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11011 SUNSET HILLS ROAD

City RESTON	State VA	Zip Code 20190
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FEC ID number of contributing federal political committee. **C** C00078451

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2019

Transaction ID : SA11C.4435

Amount of Each Receipt this Period
2500.00

Memo Item

C. LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON	State VA	Zip Code 22202
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FEC ID number of contributing federal political committee. **C** C00303024

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
10	/	21	/	2019

Transaction ID : SA11C.4432

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
<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)
Making Americans Count PAC (MAC PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL CONFECTIONERS ASSOCIATION OF THE UNITED STATES, INC. POLITICAL ACTION COMMITTEE (

Mailing Address 1101 30TH STREET NW, SUITE 200

City WASHINGTON	State DC	Zip Code 20007
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FEC ID number of contributing federal political committee. **C** C00003855

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2019

Transaction ID : SA11C.4479

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PPL CORPORATION PEOPLE FOR GOOD GOVERNMENT

Mailing Address TWO NORTH NINTH STREET GENTW2

City ALLENTOWN	State PA	Zip Code 18101
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00228106

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2019

Transaction ID : SA11C.4424

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SPACE EXPLORATION TECHNOLOGIES CORP. PAC

Mailing Address 1155 F STREET, NW SUITE 475

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00411116

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2019

Transaction ID : SA11C.4430

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	27500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Making Americans Count PAC (MAC PAC)

Full Name (Last, First, Middle Initial)

A. Bank of America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2019

Mailing Address 201 Pennsylvania Ave, SE

FEC Identification Number

C []
Transaction ID : SB21B.4441
 Amount of Each Disbursement this Period
 [] 29.95

City Washington State DC Zip Code 20003

Purpose of Disbursement Bank Fee []

Candidate Name [] Category/Type

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

Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2019

Mailing Address 201 Pennsylvania Ave, SE

FEC Identification Number

C []
Transaction ID : SB21B.4442
 Amount of Each Disbursement this Period
 [] 29.95

City Washington State DC Zip Code 20003

Purpose of Disbursement Bank Fee []

Candidate Name [] Category/Type

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

Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2019

Mailing Address 201 Pennsylvania Ave, SE

FEC Identification Number

C []
Transaction ID : SB21B.4443
 Amount of Each Disbursement this Period
 [] 29.95

City Washington State DC Zip Code 20003

Purpose of Disbursement Bank Fee []

Candidate Name [] Category/Type

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

Memo Item

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

[] 89.85

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Making Americans Count PAC (MAC PAC)

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 10 / 01 / 2019
Mailing Address 201 Pennsylvania Ave, SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4444 Amount of Each Disbursement this Period [REDACTED] 29.95
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Bank Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CFO Compliance LLC		Date of Disbursement MM / DD / YYYY 10 / 25 / 2019
Mailing Address One Park Row, 5th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4456 Amount of Each Disbursement this Period [REDACTED] 281.25
City Providence	State RI	Zip Code 02903
Purpose of Disbursement Compliance Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CFO Compliance LLC		Date of Disbursement MM / DD / YYYY 11 / 21 / 2019
Mailing Address One Park Row, 5th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4462 Amount of Each Disbursement this Period [REDACTED] 375.55
City Providence	State RI	Zip Code 02903
Purpose of Disbursement Compliance Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 686.75
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Making Americans Count PAC (MAC PAC)

A. Eckert & Associates

Full Name (Last, First, Middle Initial)

Mailing Address 412 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4459

Amount of Each Disbursement this Period: 2189.88

Memo Item

B. Sea Pines Resort

Full Name (Last, First, Middle Initial)

Mailing Address 32 Greenwood Dr

City Hilton Head Island State SC Zip Code 29928

Purpose of Disbursement Catering & Event Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4461

Amount of Each Disbursement this Period: 16680.19

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	18870.07
TOTAL This Period (last page this line number only).....▶	19646.67

**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)
Making Americans Count PAC (MAC PAC)

Full Name (Last, First, Middle Initial) A. BEATTY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 03 / 2019
Mailing Address PO BOX 172		FEC Identification Number C C00507368 Transaction ID : SB23.4440 Amount of Each Disbursement this Period 1000.00
City COLUMBUS	State OH	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name BEATTY, JOYCE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: OH	District: 03	

Full Name (Last, First, Middle Initial) B. BEATTY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 12 / 2019
Mailing Address PO BOX 172		FEC Identification Number C C00507368 Transaction ID : SB23.4474 Amount of Each Disbursement this Period 1000.00
City COLUMBUS	State OH	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name BEATTY, JOYCE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Memo Item <input type="checkbox"/>
State: OH	District: 03	

Full Name (Last, First, Middle Initial) C. BRINDISI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 12 / 2019
Mailing Address PO BOX 165		FEC Identification Number C C00648725 Transaction ID : SB23.4465 Amount of Each Disbursement this Period 1000.00
City UTICA	State NY	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name BRINDISI, ANTHONY, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: NY	District: 22	

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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)
Making Americans Count PAC (MAC PAC)

Full Name (Last, First, Middle Initial) A. CINDY AXNE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 12 / 2019
Mailing Address PO BOX 65551		FEC Identification Number C 000646844 Transaction ID : SB23.4469
City WEST DES MOINES	State IA	Zip Code 50265
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name AXNE, CINDY, , ,	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA District: 03		

Full Name (Last, First, Middle Initial) B. COLIN ALLRED FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 30 / 2019
Mailing Address PO BOX 601631		FEC Identification Number C 000637868 Transaction ID : SB23.4491
City DALLAS	State TX	Zip Code 75360
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: TX District: 32		

Full Name (Last, First, Middle Initial) C. CONOR LAMB FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 12 / 2019
Mailing Address PO BOX 10381		FEC Identification Number C 000657411 Transaction ID : SB23.4472
City PITTSBURGH	State PA	Zip Code 15234
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name LAMB, CONOR, , ,	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA District: 17		

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

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

3000.00

**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)
Making Americans Count PAC (MAC PAC)

A. MIKIE SHERRILL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 43032

City MONTCLAIR State NJ Zip Code 07043

Purpose of Disbursement Contribution

Candidate Name SHERRILL, MIKIE, , ,

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: NJ District: 11

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2019

FEC Identification Number

C C00640003

Transaction ID : SB23.4482

Amount of Each Disbursement this Period

1000.00

Memo Item

B. NEVADANS FOR STEVEN HORSFORD

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 336664

City NORTH LAS VEGAS State NV Zip Code 89033

Purpose of Disbursement Contribution

Candidate Name HORSFORD, STEVEN ALEXZANDER, , ,

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: NV District: 04

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2019

FEC Identification Number

C C00668228

Transaction ID : SB23.4485

Amount of Each Disbursement this Period

1000.00

Memo Item

C. SPANBERGER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3121

City GLEN ALLEN State VA Zip Code 23058

Purpose of Disbursement Contribution

Candidate Name SPANBERGER, ABIGAIL, , ,

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: VA District: 07

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2019

FEC Identification Number

C C00649913

Transaction ID : SB23.4494

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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)
Making Americans Count PAC (MAC PAC)

A. SUSAN WILD FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 1636 N CEDAR CREST BLVD #183

City ALLENTOWN State PA Zip Code 18104

Purpose of Disbursement Contribution

Candidate Name WILD, SUSAN, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: PA District: 15

Date of Disbursement: 12 / 12 / 2019

FEC Identification Number: C 000658567
Transaction ID : SB23.4473
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. SUSIE LEE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 5130 S FORT APACHE RD STE. 215-382

City LAS VEGAS State NV Zip Code 89148

Purpose of Disbursement Contribution

Candidate Name LEE, SUSIE, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NV District: 03

Date of Disbursement: 12 / 30 / 2019

FEC Identification Number: C 000655613
Transaction ID : SB23.4488
Amount of Each Disbursement this Period: 1000.00

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

2000.00

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

11000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Making Americans Count PAC (MAC PAC)

Full Name (Last, First, Middle Initial) A. Committee to Elect Bill Richard		Date of Disbursement M M / D D / Y Y Y Y Y Y 07 / 26 / 2019	
Mailing Address PO Box 545			
City Harrisburg	State PA	Zip Code 17108	
Purpose of Disbursement Nonfederal Contribution		FEC Identification Number C	
Candidate Name		Transaction ID : SB29.4446 Amount of Each Disbursement this Period 250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00