

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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [01] / [01] / [2022] through [01] / [31] / [2022]

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 [02] / [07] / [2022]

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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="2022"/>	<input type="text" value="151332.04"/>	<input type="text" value="151332.04"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="151332.04"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12351.18"/>	<input type="text" value="12351.18"/>
(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="163683.22"/>	<input type="text" value="163683.22"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15605.89"/>	<input type="text" value="15605.89"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="148077.33"/>	<input type="text" value="148077.33"/>
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).....	7251.18	7251.18
(ii) Unitemized	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7351.18	7351.18
(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)	7351.18	7351.18
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.....	5000.00	5000.00
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)).....▶	12351.18	12351.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	12351.18	12351.18

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	105.89	105.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	105.89	105.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	15000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	500.00	500.00
(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)).....	500.00	500.00
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)) ..	15605.89	15605.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15605.89	15605.89

DETAILED SUMMARY PAGE
of Disbursements

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)	7351.18	7351.18
34. Total Contribution Refunds (from Line 28(d))	500.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6851.18	6851.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	105.89	105.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	105.89	105.89

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 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. Miller, Bruce, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15315 Magnolia Blvd
 Ste 113
 City Sherman Oaks State CA Zip Code 91403-1100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bruce Miller & Associates 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
 01 / 03 / 2022
Transaction ID : A53A98649C78B4DD7BC7
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Thomson, Alexander, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 Military Rd
 City Arlington State VA Zip Code 22207-3925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Thomson Management Group Inc. 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
 01 / 05 / 2022
Transaction ID : ADD9F7EB1771E4753965
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Cheatham & Associates
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8480 Red Oak St
 City Rancho Cucamonga State CA Zip Code 91730-3815
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 06 / 2022
Transaction ID : A71671E7333794F5FA2B
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Refunded on 1/18/2022

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 15
<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. Lyman, Nancy, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Hillside Rd
 City Rutland State VT Zip Code 05701-3315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) O'Brien Shortle Reynolds & Sabotka Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 08 / 2022
Transaction ID : ADB6CCED9FFEC4086A4E
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Midwood, Twila, Denton, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 Heathrow Cir
 City Rockledge State FL Zip Code 32955-4732
 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 ▼ 750.00

Date of Receipt 01 / 10 / 2022
Transaction ID : A166B86EF34794365A58
 Amount of Each Receipt this Period 750.00
 Memo Item

C. Gorczynski, Thomas, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 E Indianola Ave
 City Phoenix State AZ Zip Code 85012-2002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gorczynski & Associates LLC Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 12 / 2022
Transaction ID : ADEBAB512AAC24D46B73
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2750.00
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 8 OF 15
<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. Beasterfeld, Peggy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 5295

City Topeka	State KS	Zip Code 66605-0295
----------------	-------------	------------------------

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

Name of Employer (for Individual) Peggy's Tax and Accounting	Occupation (for Individual) Enrolled Agent
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	14	/	2022

Transaction ID : A4B7F9C9699414327922

Amount of Each Receipt this Period
500.00

Memo Item

B. Hudak, Warren, , Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 Fernwood Ave
Ste 202

City Camp Hill	State PA	Zip Code 17011-6902
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Hudak & 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
01	/	17	/	2022

Transaction ID : A83E5F2CEAFBC4422AE5

Amount of Each Receipt this Period
250.00

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
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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 ▼
501.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	18	/	2022

Transaction ID : AC9FBB29ADF1A49F0AA7

Amount of Each Receipt this Period
501.18

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1251.18
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 15
<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. Hartmann, Robert, G., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 Roberta Ln
 Ste 100
 City Sparks State NV Zip Code 89431-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hartmann Professional Services Inc. Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 21 / 2022
Transaction ID : A358C996373F64D04BBA
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Cosgray, Linda, Day, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1840 MacKenzie Dr
 Ste 102
 City Columbus State OH Zip Code 43220-2980
 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 ▼ 250.00

Date of Receipt 01 / 21 / 2022
Transaction ID : A4A36B2A4BF3E45FF8FC
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Carlisle, E.A., Michael A., A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6735 78th Ave
 City Pinellas Park State FL Zip Code 33781-2028
 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 01 / 22 / 2022
Transaction ID : A5B6EE62C11264A7A9F4
 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:	PAGE 10 OF 15
	(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"/> 12
		<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. 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 01 / 28 / 2022
Transaction ID : A5CF4D5623BBB4978B5A
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MacMillan, Jennifer, Wren, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 Bond St
 City Manitou Springs State CO Zip Code 80829-2159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jennifer MacMillan EA Occupation (for Individual) Enrolled Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 28 / 2022
Transaction ID : AB65A3471DCDC411A905
 Amount of Each Receipt this Period 500.00
 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

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	7251.18

**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 15
<input 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 checked="" 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. PORTMAN FOR SENATE COMMITTEE

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

Mailing Address 1111 19th Street NW
Suite 1100

City DUBLIN State OH Zip Code 43017-8914

FEC ID number of contributing federal political committee. **C** C00458463

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 06 / 2022

Transaction ID : A12C294BF9CB0412DB54

Amount of Each Receipt this Period
5000.00

Memo Item
Refund of 2/18/18 and 8/15/18 checks

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 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 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).....	5000.00

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)

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
20036-3310

Purpose of Disbursement
Bank Fees

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:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : B339E61C811

Amount of Each Disbursement this Period

[] 105.89

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

Date of Disbursement

M	M	/	D	D	/	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:

<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:

Date of Disbursement

M	M	/	D	D	/	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)..... ▶

[] 105.89

[] 105.89

**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. Vern Buchanan for Congress

Mailing Address PO Box 15239

City
Washington

State
DC

Zip Code
20003-0239

Purpose of Disbursement

Candidate Name

Buchanan, Vern, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: FL District: 16

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2022

FEC Identification Number

C C00412759

Transaction ID : BF8A0EF557.

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Vern Buchanan for Congress

Mailing Address PO Box 15239

City
Washington

State
DC

Zip Code
20003-0239

Purpose of Disbursement
Contribution to Committee

Candidate Name

Buchanan, Vern, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: FL District: 16

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2022

FEC Identification Number

C C00412759

Transaction ID : B43F460B4C

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. 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

MM / DD / YYYY
01 / 31 / 2022

FEC Identification Number

C C00230482

Transaction ID : B6580E6310I

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

11500.00

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)

National Association of Enrolled Agents Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hawkeye PAC

Mailing Address 1020 North Fairfax Street
Suite 201

City
Alexandria

State
VA

Zip Code
22314-2068

Purpose of Disbursement
Contribution to Committee

Candidate Name

Hawkeye PAC

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) **Other**

State: District:

Date of Disbursement

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

FEC Identification Number

C C00379479

Transaction ID : BA2411DA46

Amount of Each Disbursement this Period

3500.00

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

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	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

Disbursement For:
 Primary General
 Other (specify) **Other**

State: District:

Date of Disbursement

M	M	/	D	D	/	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)..... ▶

3500.00

15000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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. Cheatham & Associates

Mailing Address 8480 Red Oak St

City
Rancho Cucamonga

State
CA

Zip Code
91730-3815

Purpose of Disbursement
Refund of 1/6/2022 contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
01 / 18 / 2022

FEC Identification Number

C
Transaction ID : B8F83050465
Amount of Each Disbursement this Period
 500.00

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

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M / D D / 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

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M / D D / 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).....▶

500.00

500.00