

**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

C3 PAC

ADDRESS (number and street)

PO BOX 26141

Check if different  
than previously  
reported. (ACC)

ALEXANDRIA

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00680314

3. IS THIS  
REPORTNEW  
(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

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  
08 01 2022

through

M M M / D D D / Y Y Y Y Y Y  
08 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.

Marston, Chris, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Marston, Chris, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
09 20 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.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

C3 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="2022"/>		<input type="text" value="15497.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9329.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5478.60"/>	<input type="text" value="49736.24"/>
(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="14808.20"/>	<input type="text" value="65233.93"/>
7. Total Disbursements (from Line 31) .....	<input type="text" value="5606.22"/>	<input type="text" value="56031.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<input type="text" value="9201.98"/>	<input type="text" value="9201.98"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**C3 PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
08	/	01	/	2022

To:

M M	/	D D	/	Y Y Y Y
08	/	31	/	2022

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).....	2781.00	14361.00
(ii) Unitemized .....	2697.60	35374.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5478.60	49735.60
(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) .....	5478.60	49735.60
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	0.64
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)) .....	5478.60	49736.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5478.60	49736.24

# **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 .....	5666.22	55574.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5666.22	55574.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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 .....	- 60.00	457.80
(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)).....	- 60.00	457.80
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)) ..	5606.22	56031.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5606.22	56031.95

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5478.60	49735.60
34. Total Contribution Refunds (from Line 28(d)) .....	- 60.00	457.80
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5538.60	49277.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	5666.22	55574.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.64
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	5666.22	55573.51

# 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 30

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Anderson, Leonard, , ,**

Mailing Address 18 Dolce Luna Court

City  
Henderson

State  
NV

Zip Code  
89011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

**08 / 30 / 2022**

**Transaction ID : SA11AI.6767**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Baldwin, Pamela, , ,**

Mailing Address 119 12th St

City  
Del Mar

State  
CA

Zip Code  
92017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

**08 / 26 / 2022**

**Transaction ID : SA11AI.6805**

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

**C. Balthaar, Susan, , ,**

Mailing Address 19636 Gulf Blvd.

City  
Indian Shores

State  
FL

Zip Code  
33785

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

**08 / 13 / 2022**

**Transaction ID : SA11AI.6926**

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

205.00

# **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 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Blount, Kevin, , ,**

Mailing Address 5553 WETLANDS DR

City  
FREDERICK

State  
CO

Zip Code  
80504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Carousel industries

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
08 / 01 / 2022

Transaction ID : SA11AI.7022

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Brouhard, Jeanine, , ,**

Mailing Address 9247 Sepulveda Boulevard, 22

City  
North Hills

State  
CA

Zip Code  
91343

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

MM / DD / YYYY  
08 / 02 / 2022

Transaction ID : SA11AI.7017

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Brouhard, Jeanine, , ,**

Mailing Address 9247 Sepulveda Boulevard, 22

City  
North Hills

State  
CA

Zip Code  
91343

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

690.00

Date of Receipt

MM / DD / YYYY  
08 / 06 / 2022

Transaction ID : SA11AI.7005

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

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

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

FOR LINE NUMBER: PAGE 8 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Brouhard, Jeanine, , ,**

Mailing Address 9247 Sepulveda Boulevard, 22

City  
North Hills

State  
CA

Zip Code  
91343

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

08 / 16 / 2022

Transaction ID : SA11AI.6882

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**B. Brown, Dennis, , ,**

Mailing Address 140 West Cottonwood Street

City  
Amarillo

State  
TX

Zip Code  
79108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 07 / 2022

Transaction ID : SA11AI.6987

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Cartet, Lowell, , ,**

Mailing Address 2 Swallow Field

City  
Cincinnati

State  
OH

Zip Code  
45174

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 16 / 2022

Transaction ID : SA11AI.6895

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

65.00



# 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 9 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Cassidy, Al, , ,**

Mailing Address 2954 Plantation Road

City  
Winter Haven

State  
FL

Zip Code  
33884

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Real Estate Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 10 / 2022

Transaction ID : SA11Al.6956

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Cheatham, Nancy M, , ,**

Mailing Address 811 West Gray Street

City  
Houston

State  
TX

Zip Code  
77019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Command Ventures INC

Occupation (for Individual)  
Controllet

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1720.00

Date of Receipt

08 / 21 / 2022

Transaction ID : SA11Al.6832

Amount of Each Receipt this Period

110.00

☐ Memo Item

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

**C. Cheatham, Nancy M, , ,**

Mailing Address 811 West Gray Street

City  
Houston

State  
TX

Zip Code  
77019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Command Ventures INC

Occupation (for Individual)  
Controllet

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

08 / 24 / 2022

Transaction ID : SA11Al.6811

Amount of Each Receipt this Period

120.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

330.00

# **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 10 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. DeFreece, Michael, , ,**

Mailing Address 8903 Douglas CT

City  
Omaha

State  
NE

Zip Code  
68114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 16 / 2022

Transaction ID : SA11AI.6877

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Fauntleroy, Kate, , ,**

Mailing Address 8046 North Promontory Ranch Road

City  
Park City

State  
UT

Zip Code  
84098

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
real estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 07 / 2022

Transaction ID : SA11AI.6985

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Figueiredo, Jose, , ,**

Mailing Address 212 Delancy Street

City  
Newark

State  
NJ

Zip Code  
07105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / 15 / 2022

Transaction ID : SA11AI.6901

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

170.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Fink, Karen, , ,**

Mailing Address 343 Pierson Rd.

City  
Sequim

State  
WA

Zip Code  
98382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Dog groomer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 12 / 2022

Transaction ID : SA11AI.6930

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Fritts, Courtney, , ,**

Mailing Address 510 Golfview Drive

City

Peachtree City

State

GA

Zip Code

30269

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 10 / 2022

Transaction ID : SA11AI.6955

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Garner, Bryan, , ,**

Mailing Address 20 Edgewater Drive

City

Amarillo

State

TX

Zip Code

79106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 09 / 2022

Transaction ID : SA11AI.6966

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

110.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 30  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Gwaltney, Rosalie, , ,**

Mailing Address 1531N. Main street Apt.515

City  
Lovington

State  
NM

Zip Code  
88260

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NorLea Hospital

Occupation (for Individual)  
Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 05 / 2022

**Transaction ID : SA11AI.7007**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Gwaltney, Rosalie, , ,**

Mailing Address 1531N. Main street Apt.515

City  
Lovington

State  
NM

Zip Code  
88260

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NorLea Hospital

Occupation (for Individual)  
Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 21 / 2022

**Transaction ID : SA11AI.6834**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Hornstein, Michael, , ,**

Mailing Address 29585 Kraemer Lake Road

City  
St Joseph

State  
MN

Zip Code  
56374

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 16 / 2022

**Transaction ID : SA11AI.6878**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

185.00

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

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Hucke, Jon, , ,**

Mailing Address 2913 Long Loop Unit C

City

Fort Meade

State

MD

Zip Code

20755

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

US Army

Occupation (for Individual)

Soldier

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 08 / 2022

Transaction ID : SA11AI.6969

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. Irwin, Patrick, , ,**

Mailing Address 8426 Dragon St

City

San Antonio

State

TX

Zip Code

78254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 25 / 2022

Transaction ID : SA11AI.6806

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**C. Jackson, Thomas, , ,**

Mailing Address 1111 Morse Avenue, Spc 120

City

Sunnyvale

State

CA

Zip Code

94089

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Sales

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

08 / 21 / 2022

Transaction ID : SA11AI.6835

Amount of Each Receipt this Period

45.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

110.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Johnson, Ralph, , ,**

Mailing Address 14806 W Sky Hawk Dr

City

Sun City West

State

AZ

Zip Code

85375

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ralph D Johnson Inc

Occupation (for Individual)

Public Accountant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 14 / 2022

Transaction ID : SA11AI.6913

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Johnson, Ralph, , ,**

Mailing Address 14806 W Sky Hawk Dr

City

Sun City West

State

AZ

Zip Code

85375

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ralph D Johnson Inc

Occupation (for Individual)

Public Accountant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 27 / 2022

Transaction ID : SA11AI.6795

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Jones, Charles, , ,**

Mailing Address 4505 Little River Road

City

Birmingham

State

AL

Zip Code

35213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bluestone Coke, LLC

Occupation (for Individual)

Environmental Chemist

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 10 / 2022

Transaction ID : SA11AI.6947

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

175.00

**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  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Jones, Craig, , ,**

Mailing Address 2021 Jamestown Way

City

Oxnard

State

CA

Zip Code

93035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 10 / 2022

Transaction ID : SA11AI.6949

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. JonesElliott, Reidun E, , ,**

Mailing Address 49 Springbrook Dr Unit 1C

City

Belfast

State

ME

Zip Code

04915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 08 / 2022

Transaction ID : SA11AI.6977

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Klinge, Patricia, , ,**

Mailing Address 5428 White Aster Way

City

Indianapolis

State

IN

Zip Code

46237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 05 / 2022

Transaction ID : SA11AI.7009

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

95.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Leon, Guido, , ,**

Mailing Address 4901 Quail Run Avenue

City

Las Cruces

State

NM

Zip Code

88012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 30 / 2022

Transaction ID : SA11AI.6769

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**B. Leon, Guido, , ,**

Mailing Address 4901 Quail Run Avenue

City

Las Cruces

State

NM

Zip Code

88012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 30 / 2022

Transaction ID : SA11AI.6770

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Lewis, Dale, , ,**

Mailing Address 6203 Highcroft Drive

City

Naples

State

FL

Zip Code

34119

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Afc

Occupation (for Individual)

Rn/admin asst

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 17 / 2022

Transaction ID : SA11AI.6876

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

120.00

**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  
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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Little, James, , ,**

Mailing Address 2233 W Channing St

City  
West Covina

State  
CA

Zip Code  
91790

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 10 / 2022

**Transaction ID : SA11AI.6940**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. Little, James, , ,**

Mailing Address 2233 W Channing St

City  
West Covina

State  
CA

Zip Code  
91790

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 17 / 2022

**Transaction ID : SA11AI.6875**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

**C. Lojacono, Gregory, , ,**

Mailing Address 2407 pro tour dr

City  
Belleville

State  
IL

Zip Code  
62220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 03 / 2022

**Transaction ID : SA11AI.7015**

Amount of Each Receipt this Period

15.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

26.00

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

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Lojacono, Gregory, , ,**

Mailing Address 2407 pro tour dr

City  
Belleville

State  
IL

Zip Code  
62220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

**08 / 13 / 2022**

**Transaction ID : SA11AI.6918**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**B. Mackey, Susan, , ,**

Mailing Address 2316 North Patterson Street

City  
Valdosta

State  
GA

Zip Code  
31602

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

**08 / 10 / 2022**

**Transaction ID : SA11AI.6945**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Mason, Juanita, , ,**

Mailing Address 414 Water Street

City  
Baltimore

State  
MD

Zip Code  
21202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**08 / 06 / 2022**

**Transaction ID : SA11AI.7004**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

165.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Mason, Juanita, , ,**

Mailing Address 414 Water Street

City  
Baltimore

State  
MD

Zip Code  
21202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 12 / 2022

Transaction ID : SA11AI.6929

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. McGettigan, Lidia, , ,**

Mailing Address 11 Lawnside Rd

City  
Cheltenham

State  
PA

Zip Code  
19012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Express Business

Occupation (for Individual)  
Tax adviser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 06 / 2022

Transaction ID : SA11AI.6995

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Noble, Lawrence, , ,**

Mailing Address 567 W.Channel Islands Blvd.

City  
Port Hueneme

State  
CA

Zip Code  
93041

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 19 / 2022

Transaction ID : SA11AI.6850

Amount of Each Receipt this Period

90.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

190.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
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PAGE 20 OF 30

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Owen, Phillip, , ,**

Mailing Address 21 South Randolph Avenue

City

Kissimmee

State

FL

Zip Code

34741

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Real estate dev

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**08 / 19 / 2022**

**Transaction ID : SA11AI.6854**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Owen, Phillip, , ,**

Mailing Address 21 South Randolph Avenue

City

Kissimmee

State

FL

Zip Code

34741

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Real estate dev

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**08 / 29 / 2022**

**Transaction ID : SA11AI.6773**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Parks, Paul, , ,**

Mailing Address 4230 Camino Ticino

City

San Diego

State

CA

Zip Code

92122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

General Atomics

Occupation (for Individual)

Physicist

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

**08 / 16 / 2022**

**Transaction ID : SA11AI.6892**

Amount of Each Receipt this Period

45.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

95.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Paulos, Barbara, , ,**

Mailing Address 4760 Highland Drive

City  
MillcreekState  
UTZip Code  
84117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 01 / 2022

**Transaction ID : SA11AI.7024**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. Paulos, Barbara, , ,**

Mailing Address 4760 Highland Drive

City  
MillcreekState  
UTZip Code  
84117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 11 / 2022

**Transaction ID : SA11AI.6936**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. Potignano, Cindy, , ,**

Mailing Address 16540 E Gunsight Drive Unit 2003

City  
PhoenixState  
AZZip Code  
85268FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Southwest Skin SpecialistsOccupation (for Individual)  
Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2022

**Transaction ID : SA11AI.6903**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.00

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

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

FOR LINE NUMBER: PAGE 22 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Potignano, Cindy, , ,**

Mailing Address 16540 E Gunsight Drive Unit 2003

City  
Phoenix

State  
AZ

Zip Code  
85268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Southwest Skin Specialists

Occupation (for Individual)  
Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

**08** / **19** / **2022**

**Transaction ID : SA11AI.6857**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Potignano, Cindy, , ,**

Mailing Address 16540 E Gunsight Drive Unit 2003

City  
Phoenix

State  
AZ

Zip Code  
85268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Southwest Skin Specialists

Occupation (for Individual)  
Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

**08** / **22** / **2022**

**Transaction ID : SA11AI.6827**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**C. Revutsky, Maria, , ,**

Mailing Address 5988 South Street Road

City  
Auburn

State  
NY

Zip Code  
13021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**08** / **27** / **2022**

**Transaction ID : SA11AI.6794**

Amount of Each Receipt this Period

15.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

55.00

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

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

FOR LINE NUMBER: PAGE 23 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Revutsky, Maria, , ,**

Mailing Address 5988 South Street Road

City  
Auburn

State  
NY

Zip Code  
13021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 28 / 2022

**Transaction ID : SA11AI.6783**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**B. Rock, Ron, , ,**

Mailing Address E. 1593 Polston Ave.

City  
Post Falls

State  
ID

Zip Code  
83854

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 16 / 2022

**Transaction ID : SA11AI.6894**

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

**C. Sellers, Brett, , ,**

Mailing Address 30594 Lee's Chicken Lane

City  
Millsboro

State  
DE

Zip Code  
19966

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mountaire

Occupation (for Individual)  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 08 / 2022

**Transaction ID : SA11AI.6978**

Amount of Each Receipt this Period

5.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

# 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 24 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Sellers, Brett, , ,**

Mailing Address 30594 Lee's Chicken Lane

City

Millsboro

State

DE

Zip Code

19966

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Mountaire

Occupation (for Individual)

Farmer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

08 / 16 / 2022

Transaction ID : SA11AI.6889

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Sellers, Brett, , ,**

Mailing Address 30594 Lee's Chicken Lane

City

Millsboro

State

DE

Zip Code

19966

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Mountaire

Occupation (for Individual)

Farmer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 21 / 2022

Transaction ID : SA11AI.6829

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**C. STRAIGHT, SANDY, , ,**

Mailing Address 3218 North Thompson Street

City

Springdale

State

AR

Zip Code

72764

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

STRAIGHTS LAWN GARDEN

Occupation (for Individual)

BUINESS OWNER

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

410.00

Date of Receipt

08 / 09 / 2022

Transaction ID : SA11AI.6959

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

60.00



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

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

FOR LINE NUMBER: PAGE 25 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. STRAIGHT, SANDY, , ,**

Mailing Address 3218 North Thompson Street

City  
Springdale

State  
AR

Zip Code  
72764

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRAIGHTS LAWN GARDEN

Occupation (for Individual)  
BUINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 10 / 2022

**Transaction ID : SA11AI.6948**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. Supulski, Ted, , ,**

Mailing Address 2483 Youngers Creek Rd

City  
Elizabethtown

State  
KY

Zip Code  
42701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 21 / 2022

**Transaction ID : SA11AI.6841**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Sutphin, Lorraine, , ,**

Mailing Address 1159 Rt 12a

City  
Plainfield

State  
NJ

Zip Code  
03781

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DHMC

Occupation (for Individual)  
Nurse Practitioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 18 / 2022

**Transaction ID : SA11AI.6864**

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

90.00

# 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 26 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Swanson, Louise, , ,**

Mailing Address 1030 Windsor Drive

City

Thousand Oaks

State

CA

Zip Code

91360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pacific Edge Marketing Group

Occupation (for Individual)

Administrative Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 10 / 2022

Transaction ID : SA11AI.6944

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. Thompson, Donald, , ,**

Mailing Address PO BOX 10139

City

Fairbanks

State

AK

Zip Code

99710

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Kinross

Occupation (for Individual)

Temp disabled mechanic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

08 / 06 / 2022

Transaction ID : SA11AI.7006

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

**C. Trachsel, Thomas, , ,**

Mailing Address 910 Council Rock Drive

City

South Lake Tahoe

State

CA

Zip Code

96150

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Alpine Carpet One

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 09 / 2022

Transaction ID : SA11AI.6964

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

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

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

FOR LINE NUMBER: PAGE 27 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. Vaught, John, , ,**

Mailing Address 2920 Demington Avenue Northwest

City  
Canton

State  
OH

Zip Code  
44718

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Tri-cast

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 08 / 2022

Transaction ID : SA11AI.6968

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. Wells, Brett, , ,**

Mailing Address 133 D & Rg Dr.

City  
Durango

State  
CO

Zip Code  
81303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Jeanne Parks Living Trust

Occupation (for Individual)  
Ranch foreman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

08 / 10 / 2022

Transaction ID : SA11AI.6954

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**C. Wells, Brett, , ,**

Mailing Address 133 D & Rg Dr.

City  
Durango

State  
CO

Zip Code  
81303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Jeanne Parks Living Trust

Occupation (for Individual)  
Ranch foreman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 27 / 2022

Transaction ID : SA11AI.6793

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

70.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**C3 PAC**

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

**A. witkin, jack, , ,**

Mailing Address 1535 High St

City  
Boulder

State  
CO

Zip Code  
80304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 16 / 2022

Transaction ID : SA11AI.6880

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**B. Woo, Winston, , ,**

Mailing Address 1913 Douglas Avenue

City  
Allen

State  
TX

Zip Code  
75013

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 07 / 2022

Transaction ID : SA11AI.6986

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C.**

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)..... ►

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

105.00

2781.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 30

<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)

**C3 PAC**

Full Name (Last, First, Middle Initial)

**A. Election CFO LLC**

Mailing Address PO Box 26141

City  
AlexandriaState  
VAZip Code  
22313Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	0			2	0	2	2		

FEC Identification Number

**C****Transaction ID : SB21B.6475**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 510 Townsend St

City  
San FranciscoState  
CAZip Code  
94103Purpose of Disbursement  
Dispute Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

FEC Identification Number

**C****Transaction ID : SB21B.7028**

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 510 Townsend St

City  
San FranciscoState  
CAZip Code  
94103Purpose of Disbursement  
Dispute Fee Reversals

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

FEC Identification Number

**C****Transaction ID : SB21B.7029**

Amount of Each Disbursement this Period

- 30.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 30

<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)

**C3 PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 510 Townsend St

City  
San FranciscoState  
CAZip Code  
94103Purpose of Disbursement  
CC Processing and Sub-Vendor Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

FEC Identification Number

**C****Transaction ID : SB21B.7030**

Amount of Each Disbursement this Period

4666.22

☐ 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 M	/	D 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 M	/	D 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).....▶

4666.22

5666.22