

# 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**  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

ADDRESS (number and street) **8444 COUNTY RD M.**  
Check if different than previously reported. (ACC) **FREDONIA WI 53021**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00622472** 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2023 through  /  /  2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer **PIARO, ROBERT, , ,**

Signature of Treasurer **PIARO, ROBERT, , ,** [Electronically Filed] Date  /  /  2023

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

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS 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="2023"/>		<input type="text" value="10397.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10397.99"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1913.00"/>	<input type="text" value="1913.00"/>
(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="12310.99"/>	<input type="text" value="12310.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5897.38"/>	<input type="text" value="5897.38"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6413.61"/>	<input type="text" value="6413.61"/>
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

Write or Type Committee Name

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC

Report Covering the Period: From: 01 / 01 / 2023 To: 03 / 31 / 2023

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).....	0.00	0.00
(ii) Unitemized .....	1913.00	1913.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1913.00	1913.00
(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) .....	1913.00	1913.00
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)).....▶	1913.00	1913.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1913.00	1913.00

**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 .....	5897.38	5897.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5897.38	5897.38
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 .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5897.38	5897.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5897.38	5897.38

**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) .....	1913.00	1913.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1913.00	1913.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5897.38	5897.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5897.38	5897.38

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XT  
Transaction ID :

This Committee is not involved in any matter before the Commission, nor does this committee have any outstanding debts and/or obligations. Additionally, this committee is no longer actively seeking contributions, or making independent expenditures. The remaining funds in this committees account will be used to pay any remaining bills/closing costs, and/or donated to a charity, once they receive notification from the Commission that their termination report has been approved.

Form/Schedule:  
Transaction ID:

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)

Grid for line numbers 21b-30b with checkboxes. 21b is checked.

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC

Full Name (Last, First, Middle Initial)

A. Cloud Data Services

Date of Disbursement

Date selection grid: 02 / 27 / 2023

Mailing Address 1009 Whitney Ranch Dr
BOX 130

City Henderson State NV Zip Code 89014

Purpose of Disbursement Caging and Database Services

Category/Type grid: 003

FEC Identification Number

FEC ID grid: C

Transaction ID : SB21B-82747
Amount of Each Disbursement this Period

Amount grid: 860.76

Memo Item checkbox

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

Full Name (Last, First, Middle Initial)

B. LAV Services LLC

Date of Disbursement

Date selection grid: 03 / 22 / 2023

Mailing Address 1009 Whitney Ranch Dr.

City Henderson State NV Zip Code 89014

Purpose of Disbursement Phonebank Payroll Services

Category/Type grid: 003

FEC Identification Number

FEC ID grid: C

Transaction ID : SB21B-83623
Amount of Each Disbursement this Period

Amount grid: 681.43

Memo Item checkbox

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

Full Name (Last, First, Middle Initial)

C. PACSmart Filing Services LLC

Date of Disbursement

Date selection grid: 01 / 06 / 2023

Mailing Address 1013 Centre Road
Suite 403-A

City Wilmington State DE Zip Code 19805

Purpose of Disbursement FEC Compliance Reporting

Category/Type grid: 001

FEC Identification Number

FEC ID grid: C

Transaction ID : SB21B-82744
Amount of Each Disbursement this Period

Amount grid: 800.00

Memo Item checkbox

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

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

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

Subtotal grid: 2342.19

Total grid: (empty)

**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)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial) <b>A. PACSmart Filing Services LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2023	
Mailing Address 1013 Centre Road Suite 403-A		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B-82747</b>	
City Wilmington	State DE	Zip Code 19805	Amount of Each Disbursement this Period 600.00
Purpose of Disbursement FEC Compliance Reporting		Category/ Type 001	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) <b>B. PACSmart Filing Services LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2023	
Mailing Address 1013 Centre Road Suite 403-A		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B-82747</b>	
City Wilmington	State DE	Zip Code 19805	Amount of Each Disbursement this Period 600.00
Purpose of Disbursement FEC Compliance Reporting		Category/ Type 001	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) <b>C. Standard Data Services LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2023	
Mailing Address 513 Mill Ave SE Suite 206		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B-8362:</b>	
City New Philadelphia	State OH	Zip Code 44663	Amount of Each Disbursement this Period 789.06
Purpose of Disbursement Caging and Database Services		Category/ Type 003	Memo Item <input type="checkbox"/>
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1989.06
<b>TOTAL</b> 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)

## ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC

Full Name (Last, First, Middle Initial)

### A. Wired4Data

Mailing Address 55 Lake Havasu Ave South  
F-677

City  
Lake Havasu City

State  
AZ

Zip Code  
86403

Purpose of Disbursement  
PHONEBANK IT/TECH SUPPORT

003

Category/  
Type

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	Y	Y
0	2		1	3		2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-82747

Amount of Each Disbursement this Period

[REDACTED]	1566.13
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Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

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	Y	Y

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

[REDACTED]	
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Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

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	Y	Y

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

[REDACTED]	
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Memo Item

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

[REDACTED]	1566.13
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**TOTAL** This Period (last page this line number only).....▶

[REDACTED]	5897.38
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cloud Data Services</b>			Nature of Debt (Purpose): Leads / Phone Lists
Mailing Address 1009 Whitney Ranch Dr			
City Henderson	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period	Transaction ID : SD10-1253815	
<input type="text" value="860.76"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="860.76"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LAV Services LLC</b>			Nature of Debt (Purpose): Phonebank Payroll Services
Mailing Address 1009 Whitney Ranch Dr.			
City Henderson	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period	Transaction ID : SD10-1253811	
<input type="text" value="681.43"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="681.43"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Standard Data Services LLC</b>			Nature of Debt (Purpose): Caging and Database Services
Mailing Address 513 Mill Ave SE Suite 206			
City New Philadelphia	State OH	Zip Code 44663	

Outstanding Balance Beginning This Period	Transaction ID : SD10-1253813	
<input type="text" value="789.06"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="789.06"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wired4Data</b>			Nature of Debt (Purpose): Phonebank IT/Tech Support
Mailing Address 55 Lake Havasu Ave South F-677			
City Lake Havasu City	State AZ	Zip Code 86403	

Outstanding Balance Beginning This Period <input type="text" value="1566.13"/>	<b>Transaction ID : SD10-1253817</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1566.13"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>