

# 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.

Represent PAC (Federal)

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

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

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

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

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Jacobs, Christine, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Jacobs, Christine, , ,* [Electronically Filed] Date  /  /

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 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Represent PAC (Federal)**

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

|  | COLUMN A<br>This Period               | COLUMN B<br>Calendar Year-to-Date     |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2021"/>  | <input type="text" value="2607.20"/>  | <input type="text" value="2607.20"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="2093.94"/>  |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="9700.00"/>  | <input type="text" value="20440.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="11793.94"/> | <input type="text" value="23047.20"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="2639.50"/>  | <input type="text" value="13892.76"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="9154.44"/>  | <input type="text" value="9154.44"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>     |                                       |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

**Represent PAC (Federal)**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 9700.00                       | 20320.00                          |
| (ii) Unitemized .....   | 0.00                          | 120.00                            |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 9700.00                       | 20440.00                          |
| (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) .....  | 9700.00                       | 20440.00                          |
| 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)).....▶                         | 9700.00                       | 20440.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 9700.00                       | 20440.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 2619.50                       | 13872.76                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 2619.50                       | 13872.76                          |
| 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 .....                                  | 20.00                         | 20.00                             |
| (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)).....                            | 20.00                         | 20.00                             |
| 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)) ..      | 2639.50                       | 13892.76                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 2639.50                       | 13892.76                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 9700.00                               | 20440.00                                  |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 20.00                                 | 20.00                                     |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 9680.00                               | 20420.00                                  |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 2619.50                               | 13872.76                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 2619.50                               | 13872.76                                  |

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 6 OF 11                 |
|   | (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"/> 15  |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Represent PAC (Federal)**

**A. Horstmann-Allen, Helen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 440 Lombard St  
 City Philadelphia State PA Zip Code 19147-1517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IC Group Occupation (for Individual) business owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **11 / 30 / 2021**  
**Transaction ID : 3516324**  
 Amount of Each Receipt this Period 1700.00  
 Memo Item

**B. Lussier, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 210 W Washington Sq Apt 12SE  
 City Philadelphia State PA Zip Code 19106-3509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) None  
 Receipt For: 2022  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **11 / 05 / 2021**  
**Transaction ID : 3460593**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

**C. Miller, Leslie, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 Barberry Rd  
 City Bryn Mawr State PA Zip Code 19010-1907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 22 / 2021**  
**Transaction ID : 3516321**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 9700.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 9700.00 |

**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 |

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)  
**Represent PAC (Federal)**

**A. Forlack, Tilly, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 213 W Upsal St

City Philadelphia State PA Zip Code 19119-4004

Purpose of Disbursement Internship stipend

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 29 / 2021

FEC Identification Number: C

Transaction ID : 500029601

Amount of Each Disbursement this Period: 437.50

Memo Item

**B. PNC Bank**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 856177

City Louisville State KY Zip Code 40285-6177

Purpose of Disbursement Bank fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2022  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 01 / 2021

FEC Identification Number: C

Transaction ID : 500006973

Amount of Each Disbursement this Period: 20.00

Memo Item

**C. PNC Bank**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 856177

City Louisville State KY Zip Code 40285-6177

Purpose of Disbursement Bank fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2022  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 01 / 2021

FEC Identification Number: C

Transaction ID : 500015035

Amount of Each Disbursement this Period: 53.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 510.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**Represent PAC (Federal)**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address PO Box 856177

City  
Louisville

State  
KY

Zip Code  
40285-6177

Purpose of Disbursement  
Bank fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2021 |   |   |   |

FEC Identification Number

C [REDACTED]

**Transaction ID : 500029599**

Amount of Each Disbursement this Period

[REDACTED] 53.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PNC Bank**

Mailing Address PO Box 856177

City  
Louisville

State  
KY

Zip Code  
40285-6177

Purpose of Disbursement  
Overdraft item fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 02 |   |   | 2021 |   |   |   |

FEC Identification Number

C [REDACTED]

**Transaction ID : 500029600**

Amount of Each Disbursement this Period

[REDACTED] 36.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PNC Bank**

Mailing Address PO Box 856177

City  
Louisville

State  
KY

Zip Code  
40285-6177

Purpose of Disbursement  
Bank fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 01 |   |   | 2021 |   |   |   |

FEC Identification Number

C [REDACTED]

**Transaction ID : 500030502**

Amount of Each Disbursement this Period

[REDACTED] 20.00

Memo Item

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

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

[REDACTED] 109.00

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**Represent PAC (Federal)**

**A. Roggio-Smith Consulting, LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 222 Engle Dr

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 06    |   | 2021      |

City  
Wallingford

State  
PA

Zip Code  
19086-6336

FEC Identification Number

Purpose of Disbursement  
Compliance Consulting

|   |
|---|
| C |
|---|

Candidate Name

Category/  
Type

**Transaction ID : 500006900**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

|        |
|--------|
| 500.00 |
|--------|

State: District:

Memo Item

**B. Roggio-Smith Consulting, LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 222 Engle Dr

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 10    |   | 2021      |

City  
Wallingford

State  
PA

Zip Code  
19086-6336

FEC Identification Number

Purpose of Disbursement  
Compliance Consulting

|   |
|---|
| C |
|---|

Candidate Name

Category/  
Type

**Transaction ID : 500006901**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify)

|        |
|--------|
| 500.00 |
|--------|

State: District:

Memo Item

**C. Roggio-Smith Consulting, LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 222 Engle Dr

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 13    |   | 2021      |

City  
Wallingford

State  
PA

Zip Code  
19086-6336

FEC Identification Number

Purpose of Disbursement  
Compliance Consulting

|   |
|---|
| C |
|---|

Candidate Name

Category/  
Type

**Transaction ID : 500007095**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

|        |
|--------|
| 500.00 |
|--------|

State: District:

Memo Item

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

|         |
|---------|
| 1500.00 |
|---------|

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

|  |
|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Represent PAC (Federal)**

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Roggio-Smith Consulting, LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>10 / 20 / 2021               |  |
| Mailing Address 222 Engle Dr  |  |   |  |
| City<br>Wallingford   | State<br>PA  | Zip Code<br>19086-6336  |  |
| Purpose of Disbursement<br>Compliance Consulting  |  | FEC Identification Number<br>C  |  |
| Candidate Name  |  | Transaction ID : 500029598<br>Amount of Each Disbursement this Period<br>500.00 |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2022<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | <input type="checkbox"/> Memo Item   |   |  |

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

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

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 500.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 2619.50 |

# 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 |

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)  
**Represent PAC (Federal)**

**A. Carroll, Marie, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
08 / 06 / 2021

Mailing Address: 111 S 15th St  
Ph P301

City: Philadelphia State: PA Zip Code: 19102-3011

Purpose of Disbursement: Refund of mistaken 6/10/21 contribution

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C** \_\_\_\_\_

Transaction ID : **500006128**

Amount of Each Disbursement this Period: \_\_\_\_\_ 20.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C** \_\_\_\_\_

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C** \_\_\_\_\_

Amount of Each Disbursement this Period

Memo Item

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 20.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 20.00 |