

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**
MISSION FIRST PEOPLE ALWAYS PAC

ADDRESS (number and street) **PO BOX 2713**
Check if different than previously reported. (ACC) **FARMINGTON HILLS MI 48333**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00774588 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 / / 2021 through / / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
CRATE, BRADLEY, T., MR.,
Type or Print Name of Treasurer

Signature of Treasurer CRATE, BRADLEY, T., MR., [Electronically Filed] Date / / 2021

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

MISSION FIRST PEOPLE ALWAYS 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="2021"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="45065.89"/>	<input type="text" value="45065.89"/>
(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="45065.89"/>	<input type="text" value="45065.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22822.37"/>	<input type="text" value="22822.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="22243.52"/>	<input type="text" value="22243.52"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

MISSION FIRST PEOPLE ALWAYS PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11620.00	11620.00
(ii) Unitemized	33445.89	33445.89
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	45065.89	45065.89
(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)	45065.89	45065.89
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)).....▶	45065.89	45065.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	45065.89	45065.89

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	22822.37	22822.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	22822.37	22822.37
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)) ..	22822.37	22822.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22822.37	22822.37

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	45065.89	45065.89
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45065.89	45065.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	22822.37	22822.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22822.37	22822.37

**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 64
	(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)
MISSION FIRST PEOPLE ALWAYS PAC

A. BARTER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 PRIOLEAU ST UNIT B
 City CHARLESTON State SC Zip Code 29401
 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 ▼ 500.00

Date of Receipt 05 / 29 / 2021
Transaction ID : SA11AI.4694
 Amount of Each Receipt this Period 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4134]

B. BATY, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 SNOW RD
 City GRAYLING State MI Zip Code 49738
 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 ▼ 250.00

Date of Receipt 06 / 01 / 2021
Transaction ID : SA11AI.4527
 Amount of Each Receipt this Period 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4134]

C. BROWN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11095 ULMER RD
 City MILES State TX Zip Code 76861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RANCHER-INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 03 / 2021
Transaction ID : SA11AI.5448
 Amount of Each Receipt this Period 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4103]

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. ELZA, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 N PINESBORO DR
 City SANFORD State MI Zip Code 48657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE INSULATION CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 25 / 2021
Transaction ID : SA11A1.4764
 Amount of Each Receipt this Period 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4130]

B. ELZA, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 N PINESBORO DR
 City SANFORD State MI Zip Code 48657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE INSULATION CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 29 / 2021
Transaction ID : SA11A1.4362
 Amount of Each Receipt this Period 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4147]

C. GEORGE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22850 JETTE COURT NORTHEAST
 City SAINT PAUL State OR Zip Code 97137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTREPRENEUR Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 22 / 2021
Transaction ID : SA11A1.5124
 Amount of Each Receipt this Period 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4114]

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. GRANT, DAVISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 26236
 City AUSTIN State TX Zip Code 78755
 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 ▼ 250.00

Date of Receipt 06 / 29 / 2021
Transaction ID : SA11AI.4368
 Amount of Each Receipt this Period 50.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4147]

B. HAVERLY, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 ALISO ST
 City VENTURA State CA Zip Code 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAVERLY SYSTEMS INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2021
Transaction ID : SA11AI.5637
 Amount of Each Receipt this Period 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4100]

C. HOAGLAND, CHRISTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45314 STONEHEDGE DRIVE
 City PLYMOUTH State MI Zip Code 48170
 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 ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : SA11AI.4378
 Amount of Each Receipt this Period 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4147]

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 64
	(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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. HOAGLAND, CHRISTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45314 STONEHEDGE DRIVE
 City PLYMOUTH State MI Zip Code 48170
 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 ▼ 310.00

Date of Receipt 06 / 30 / 2021
Transaction ID : SA11AI.4233
 Amount of Each Receipt this Period 100.00
 Memo Item
EARMARKED THROUGH WINRED [SA11A1.4148]

B. HOFFMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3886 WEST HIGGINS LAKE DRIVE
 City ROSCOMMON State MI Zip Code 48653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WIMSATT BLDG MTLs Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 06 / 2021
Transaction ID : SA11AI.5399
 Amount of Each Receipt this Period 1000.00
 Memo Item
EARMARKED THROUGH WINRED [SA11A1.4104]

C. JEAN, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13831 ENTIAT RIVER ROAD
 City ENTIAT State WA Zip Code 98822
 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 ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : SA11AI.4487
 Amount of Each Receipt this Period 25.00
 Memo Item
EARMARKED THROUGH WINRED [SA11A1.4136]

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. JEAN, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13831 ENTIAT RIVER ROAD
 City ENTIAT State WA Zip Code 98822
 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 ▼ 255.00

Date of Receipt 06 / 29 / 2021
Transaction ID : SA11A1.4307
 Amount of Each Receipt this Period 45.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4147]

B. KIMBLE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2536 ERVIN RD NW
 City DOVER State OH Zip Code 44622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIMBLE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2021
Transaction ID : SA11A1.5613
 Amount of Each Receipt this Period 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4100]

C. KIMBLE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2536 ERVIN RD NW
 City DOVER State OH Zip Code 44622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIMBLE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 29 / 2021
Transaction ID : SA11A1.4730
 Amount of Each Receipt this Period 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4134]

SUBTOTAL of Receipts This Page (optional).....▶	795.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. KIMBLE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2536 ERVIN RD NW
 City DOVER State OH Zip Code 44622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIMBLE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 28 / 2021
Transaction ID : SA11A1.4406
 Amount of Each Receipt this Period 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4147]

B. LANDIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9560 HUNTINGTON LANE
 City INDIANAPOLIS State IN Zip Code 46260
 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 ▼ 500.00

Date of Receipt 06 / 30 / 2021
Transaction ID : SA11A1.4275
 Amount of Each Receipt this Period 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4149]

C. LOEB, DANIEL, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 HUDSON YARDS
 City NEW YORK State NY Zip Code 10001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THIRD POINT LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2021
Transaction ID : SA11A1.4399
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. MERCER, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 552 WOODLAND DRIVE
 City TWIN FALLS State ID Zip Code 83301
 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 ▼ 350.00

Date of Receipt 06 / 30 / 2021
Transaction ID : SA11AI.4201
 Amount of Each Receipt this Period 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4148]

B. MORIARITY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2024 SOUTH DAVIS CIRCLE
 City MESA State AZ Zip Code 85210
 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 05 / 30 / 2021
Transaction ID : SA11AI.4662
 Amount of Each Receipt this Period 75.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4134]

C. MORIARITY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2024 SOUTH DAVIS CIRCLE
 City MESA State AZ Zip Code 85210
 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 ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : SA11AI.4191
 Amount of Each Receipt this Period 75.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4148]

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. TOUREK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3545 REEDS POINT COURT SOUTHEAST
 City GRAND RAPIDS State MI Zip Code 49546
 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 ▼ 250.00

Date of Receipt 03 / 31 / 2021
Transaction ID : SA11A1.5772
 Amount of Each Receipt this Period 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4100]

B. VOGEL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 HILLSIDE RD
 City WAYNE State PA Zip Code 19087
 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 ▼ 250.00

Date of Receipt 04 / 18 / 2021
Transaction ID : SA11A1.5151
 Amount of Each Receipt this Period 50.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4112]

C. VOGEL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 HILLSIDE RD
 City WAYNE State PA Zip Code 19087
 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 ▼ 300.00

Date of Receipt 05 / 08 / 2021
Transaction ID : SA11A1.5040
 Amount of Each Receipt this Period 50.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4119]

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WALSH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 11450
 City JACKSON State WY Zip Code 83002
 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) Other (specify) Other
 Aggregate Year-to-Date **1000.00**

Date of Receipt **04 / 04 / 2021**
Transaction ID : SA11AI.5432
 Amount of Each Receipt this Period **1000.00**
 Memo Item
EARMARKED THROUGH WINRED [SA11A1.4103]

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2021 Primary General Other (specify) Other
 Aggregate Year-to-Date **0.61**

Date of Receipt **04 / 02 / 2021**
Transaction ID : SA11AI.4099
 Amount of Each Receipt this Period **0.61**
 Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2021 Primary General Other (specify) Other
 Aggregate Year-to-Date **7663.86**

Date of Receipt **04 / 05 / 2021**
Transaction ID : SA11AI.4100
 Amount of Each Receipt this Period **7663.25**
 Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
9794.22

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 06 / 2021

Transaction ID : SA11AI.4101

Amount of Each Receipt this Period
2130.36

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
10128.06

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2021

Transaction ID : SA11AI.4102

Amount of Each Receipt this Period
333.84

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
12169.79

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2021

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period
2041.73

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 64
	(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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
15823.21

Date of Receipt
04 / 09 / 2021

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period
3653.42

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
16324.27

Date of Receipt
04 / 12 / 2021

Transaction ID : SA11AI.4105

Amount of Each Receipt this Period
501.06

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
16576.93

Date of Receipt
04 / 13 / 2021

Transaction ID : SA11AI.4106

Amount of Each Receipt this Period
252.66

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
16775.77

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2021

Transaction ID : SA11AI.4107

Amount of Each Receipt this Period
198.84

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
16952.11

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2021

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period
176.34

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
16974.61

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2021

Transaction ID : SA11AI.4109

Amount of Each Receipt this Period
22.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
17074.33

Date of Receipt
04 / 19 / 2021

Transaction ID : SA11AI.4110

Amount of Each Receipt this Period
99.72

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
17119.33

Date of Receipt
04 / 21 / 2021

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period
45.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
18565.52

Date of Receipt
04 / 22 / 2021

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period
1446.19

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
18628.46

Date of Receipt
04 / 26 / 2021
Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
62.94

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
18947.06

Date of Receipt
04 / 27 / 2021
Transaction ID : SA11AI.4114

Amount of Each Receipt this Period
318.60

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
19037.96

Date of Receipt
04 / 29 / 2021
Transaction ID : SA11AI.4115

Amount of Each Receipt this Period
90.90

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
19944.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2021

Transaction ID : SA11AI.4116

Amount of Each Receipt this Period
907.02

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
20039.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2021

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
94.26

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
20061.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2021

Transaction ID : SA11AI.4118

Amount of Each Receipt this Period
22.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
21072.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2021

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period
1010.34

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
22391.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period
1319.34

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
22530.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2021

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period
138.61

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
22827.39

Date of Receipt
05 / 18 / 2021
Transaction ID : SA11AI.4122

Amount of Each Receipt this Period
297.36

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
22904.01

Date of Receipt
05 / 19 / 2021
Transaction ID : SA11AI.4123

Amount of Each Receipt this Period
76.62

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
23496.88

Date of Receipt
05 / 20 / 2021
Transaction ID : SA11AI.4124

Amount of Each Receipt this Period
592.87

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 64
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
23604.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2021

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period
107.64

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
23991.77

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2021

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period
387.25

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
24154.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	25	/	2021

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period
162.36

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
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A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
24176.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2021

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period
22.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
24229.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2021

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period
53.22

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
25139.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period
909.36

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
25211.27

Date of Receipt
06 / 01 / 2021
Transaction ID : SA11AI.4131

Amount of Each Receipt this Period
72.06

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
25323.42

Date of Receipt
06 / 02 / 2021
Transaction ID : SA11AI.4132

Amount of Each Receipt this Period
112.15

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
25386.77

Date of Receipt
06 / 03 / 2021
Transaction ID : SA11AI.4133

Amount of Each Receipt this Period
63.35

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
29226.66

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2021

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period
3839.89

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30115.68

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		07		2021

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period
889.02

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30223.92

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		08		2021

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period
108.24

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30246.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2021

Transaction ID : SA11AI.4137

Amount of Each Receipt this Period
22.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30277.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2021

Transaction ID : SA11AI.4138

Amount of Each Receipt this Period
31.32

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30313.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period
35.88

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 64
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30458.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2021

Transaction ID : SA11AI.4140

Amount of Each Receipt this Period
145.02

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30517.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2021

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
58.54

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30575.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2021

Transaction ID : SA11AI.4142

Amount of Each Receipt this Period
58.38

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30598.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		17		2021

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period
22.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30711.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2021

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period
113.40

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30724.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2021

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
13.38

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
30756.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2021

Transaction ID : SA11AI.4146

Amount of Each Receipt this Period
31.32

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

B. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
32563.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2021

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period
1807.03

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
34967.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2021

Transaction ID : SA11AI.4148

Amount of Each Receipt this Period
2404.37

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 OF 64
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2021
 Primary General
 Other (specify) Other

Aggregate Year-to-Date ▼
35662.24

Date of Receipt
MM / DD / YYYY
06 / 30 / 2021

Transaction ID : SA11AL4149

Amount of Each Receipt this Period
694.68

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED

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

Mailing Address

City	State	Zip Code
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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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	11620.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. BROWNFIELD STRATEGIC COMMUNICATIONS, LLC		Date of Disbursement MM / DD / YYYY 06 / 09 / 2021
Mailing Address 1108 E 4TH STREET		FEC Identification Number C [] Transaction ID : SB21B.5930 Amount of Each Disbursement this Period 5000.00
City ROYAL OAK	State MI	Zip Code 48067
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DICKINSON WRIGHT PLLC		Date of Disbursement MM / DD / YYYY 06 / 10 / 2021
Mailing Address 1825 EYE STREET NW SUITE 900		FEC Identification Number C [] Transaction ID : SB21B.5934 Amount of Each Disbursement this Period 1507.50
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. IMGE LLC		Date of Disbursement MM / DD / YYYY 04 / 05 / 2021
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR		FEC Identification Number C [] Transaction ID : SB21B.5936 Amount of Each Disbursement this Period 423.35
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FUNDRAISING FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

6930.85

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	6			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5938

Amount of Each Disbursement this Period

[REDACTED] 117.75

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. IMGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	7			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5939

Amount of Each Disbursement this Period

[REDACTED] 18.50

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. IMGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5940

Amount of Each Disbursement this Period

[REDACTED] 112.29

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 248.54

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMAGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.5941
Amount of Each Disbursement this Period
[REDACTED] 202.15

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

[REDACTED]
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. IMAGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.5942
Amount of Each Disbursement this Period
[REDACTED] 27.75

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

[REDACTED]
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. IMAGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	3			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.5943
Amount of Each Disbursement this Period
[REDACTED] 14.00

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

[REDACTED]
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

[REDACTED] 243.90

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. IMAGE LLC		Date of Disbursement MM / DD / YYYY 04 / 14 / 2021
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5944
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FUNDRAISING FEES		Amount of Each Disbursement this Period 11.00
Candidate Name		Memo Item <input type="checkbox"/>
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. IMAGE LLC		Date of Disbursement MM / DD / YYYY 04 / 15 / 2021
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5945
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FUNDRAISING FEES		Amount of Each Disbursement this Period 9.75
Candidate Name		Memo Item <input type="checkbox"/>
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) C. IMAGE LLC		Date of Disbursement MM / DD / YYYY 04 / 16 / 2021
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5946
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FUNDRAISING FEES		Amount of Each Disbursement this Period 1.25
Candidate Name		Memo Item <input type="checkbox"/>
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	22.00
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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5947

Amount of Each Disbursement this Period

[REDACTED] 5.50

Memo Item

Full Name (Last, First, Middle Initial)

B. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5948

Amount of Each Disbursement this Period

[REDACTED] 2.50

Memo Item

Full Name (Last, First, Middle Initial)

C. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5949

Amount of Each Disbursement this Period

[REDACTED] 80.06

Memo Item

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

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

[REDACTED] 88.06

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 26 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5950

Amount of Each Disbursement this Period

[REDACTED] 3.50

Memo Item

Full Name (Last, First, Middle Initial)

B. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 27 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5951

Amount of Each Disbursement this Period

[REDACTED] 17.50

Memo Item

Full Name (Last, First, Middle Initial)

C. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 29 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5952

Amount of Each Disbursement this Period

[REDACTED] 5.00

Memo Item

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

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

[REDACTED] 26.00

[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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING 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
05 / 05 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5953
Amount of Each Disbursement this Period
 9.00

Memo Item

Full Name (Last, First, Middle Initial)

B. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING 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
05 / 06 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5954
Amount of Each Disbursement this Period
 5.25

Memo Item

Full Name (Last, First, Middle Initial)

C. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING 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
05 / 07 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5955
Amount of Each Disbursement this Period
 1.25

Memo Item

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

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

15.50

**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 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)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMAGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5956
Amount of Each Disbursement this Period
56.00

Memo Item

Full Name (Last, First, Middle Initial)

B. IMAGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5957
Amount of Each Disbursement this Period
73.07

Memo Item

Full Name (Last, First, Middle Initial)

C. IMAGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5958
Amount of Each Disbursement this Period
7.75

Memo Item

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

136.82

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2021

FEC Identification Number

C

Transaction ID : SB21B.5959

Amount of Each Disbursement this Period

16.50

Memo Item

Full Name (Last, First, Middle Initial)

B. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2021

FEC Identification Number

C

Transaction ID : SB21B.5960

Amount of Each Disbursement this Period

4.25

Memo Item

Full Name (Last, First, Middle Initial)

C. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2021

FEC Identification Number

C

Transaction ID : SB21B.5961

Amount of Each Disbursement this Period

32.80

Memo Item

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

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

53.55

**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)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5962
Amount of Each Disbursement this Period
6.00

Memo Item

Full Name (Last, First, Middle Initial)

B. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5963
Amount of Each Disbursement this Period
20.98

Memo Item

Full Name (Last, First, Middle Initial)

C. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5964
Amount of Each Disbursement this Period
9.00

Memo Item

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

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

35.98

**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)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5965
Amount of Each Disbursement this Period
1.25

Memo Item

Full Name (Last, First, Middle Initial)

B. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5966
Amount of Each Disbursement this Period
3.00

Memo Item

Full Name (Last, First, Middle Initial)

C. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5968
Amount of Each Disbursement this Period
50.25

Memo Item

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

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

54.50

**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 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)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMAGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5969

Amount of Each Disbursement this Period

[REDACTED] 4.00

Memo Item

Full Name (Last, First, Middle Initial)

B. IMAGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5970

Amount of Each Disbursement this Period

[REDACTED] 6.25

Memo Item

Full Name (Last, First, Middle Initial)

C. IMAGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5971

Amount of Each Disbursement this Period

[REDACTED] 3.52

Memo Item

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

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

[REDACTED] 13.77

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2021

FEC Identification Number

C

Transaction ID : SB21B.5972

Amount of Each Disbursement this Period

207.55

Memo Item

Full Name (Last, First, Middle Initial)

B. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2021

FEC Identification Number

C

Transaction ID : SB21B.5973

Amount of Each Disbursement this Period

49.25

Memo Item

Full Name (Last, First, Middle Initial)

C. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2021

FEC Identification Number

C

Transaction ID : SB21B.5974

Amount of Each Disbursement this Period

6.00

Memo Item

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

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

262.80

**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)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2021

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.5967
Amount of Each Disbursement this Period
9780.24

Memo Item

Full Name (Last, First, Middle Initial)

B. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2021

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.5975
Amount of Each Disbursement this Period
1.25

Memo Item

Full Name (Last, First, Middle Initial)

C. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2021

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.5976
Amount of Each Disbursement this Period
1.75

Memo Item

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

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

9783.24

**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)

MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMAGE LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	11	/	2021

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5977

Amount of Each Disbursement this Period

[REDACTED] 2.00

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. IMAGE LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	14	/	2021

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5978

Amount of Each Disbursement this Period

[REDACTED] 8.00

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. IMAGE LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	15	/	2021

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5979

Amount of Each Disbursement this Period

[REDACTED] 3.27

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 13.27

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMAGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	6			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5980

Amount of Each Disbursement this Period

[REDACTED] 3.25

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. IMAGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5981

Amount of Each Disbursement this Period

[REDACTED] 1.25

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. IMAGE LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	2	1		

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5982

Amount of Each Disbursement this Period

[REDACTED] 6.25

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

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

[REDACTED] 10.75

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial)

A. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5983

Amount of Each Disbursement this Period

[REDACTED] 0.75

Memo Item

Full Name (Last, First, Middle Initial)

B. IMG E LLC

Mailing Address 108 SOUTH WASHINGTON ST
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5984

Amount of Each Disbursement this Period

[REDACTED] 1.75

Memo Item

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5986

Amount of Each Disbursement this Period

[REDACTED] 3298.35

Memo Item

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

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

[REDACTED] 3300.85

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 05 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.5989 Amount of Each Disbursement this Period [] 380.61
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 06 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.5990 Amount of Each Disbursement this Period [] 106.89
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 07 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.5991 Amount of Each Disbursement this Period [] 17.66
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 505.16
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5992 Amount of Each Disbursement this Period 91.95
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 09 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5993 Amount of Each Disbursement this Period 187.43
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 12 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5994 Amount of Each Disbursement this Period 26.19
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	305.57
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 13 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.5995 Amount of Each Disbursement this Period [] 13.34
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 14 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.5996 Amount of Each Disbursement this Period [] 10.16
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 15 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.5997 Amount of Each Disbursement this Period [] 8.91
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 32.41
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 16 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.5998
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period [] 1.25
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:	Category/Type	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 19 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.5999
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period [] 4.78
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:	Category/Type	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 21 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6000
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period [] 2.50
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:	Category/Type	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 8.53
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC			Date of Disbursement MM / DD / YYYY 04 / 22 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [] Transaction ID : SB21B.6001 Amount of Each Disbursement this Period [] 74.95	
City ARLINGTON	State VA	Zip Code 22219	Category/Type []	
Purpose of Disbursement MERCHANT FEES		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC			Date of Disbursement MM / DD / YYYY 04 / 26 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [] Transaction ID : SB21B.6002 Amount of Each Disbursement this Period [] 3.56	
City ARLINGTON	State VA	Zip Code 22219	Category/Type []	
Purpose of Disbursement MERCHANT FEES		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC			Date of Disbursement MM / DD / YYYY 04 / 27 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [] Transaction ID : SB21B.6003 Amount of Each Disbursement this Period [] 13.90	
City ARLINGTON	State VA	Zip Code 22219	Category/Type []	
Purpose of Disbursement MERCHANT FEES		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 92.41
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 04 / 29 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6004 Amount of Each Disbursement this Period [REDACTED] 4.10
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 05 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6005 Amount of Each Disbursement this Period [REDACTED] 43.98
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6006 Amount of Each Disbursement this Period [REDACTED] 5.49
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 53.57
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 07 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6007
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 1.25	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 13 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6008
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 53.66	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6009
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 69.04	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 123.95
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 17 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6010 Amount of Each Disbursement this Period [REDACTED] 8.64
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 18 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6011 Amount of Each Disbursement this Period [REDACTED] 16.14
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6012 Amount of Each Disbursement this Period [REDACTED] 4.13
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 28.91
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 20 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6013
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 30.33
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 21 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6014
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 6.36
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 24 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6015
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 21.43
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 58.12
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 25 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6016
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 8.64	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 26 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6017
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 1.25	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 27 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6018
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 3.78	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 13.67
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 05 / 28 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6019 Amount of Each Disbursement this Period [] 45.39
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6020 Amount of Each Disbursement this Period [] 3.94
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 02 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6021 Amount of Each Disbursement this Period [] 6.60
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 55.93
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 03 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6022
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 3.58
Candidate Name		<input type="checkbox"/> Memo Item
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. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6023
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 193.56
Candidate Name		<input type="checkbox"/> Memo Item
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) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 07 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6024
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 46.73
Candidate Name		<input type="checkbox"/> Memo Item
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	243.87
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 08 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6025 Amount of Each Disbursement this Period [] 5.76
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 09 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6026 Amount of Each Disbursement this Period [] 1.25
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 10 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6027 Amount of Each Disbursement this Period [] 1.93
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

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

[] 8.94
[]

**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)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 11 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6028
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 2.12
Candidate Name	Category/Type	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 14 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6029
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 6.98
Candidate Name	Category/Type	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6030
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 3.69
Candidate Name	Category/Type	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 12.79
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 16 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6031 Amount of Each Disbursement this Period [] 3.37
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 17 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6032 Amount of Each Disbursement this Period [] 1.25
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 18 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6033 Amount of Each Disbursement this Period [] 5.35
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 9.97
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISSION FIRST PEOPLE ALWAYS PAC

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 23 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6034 Amount of Each Disbursement this Period [] 0.87
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES, LLC		Date of Disbursement MM / DD / YYYY 06 / 24 / 2021
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.6035 Amount of Each Disbursement this Period [] 1.93
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2.80
TOTAL This Period (last page this line number only).....▶	[] 22796.98