

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

GenesisCare USA Inc. Political Action Committee

ADDRESS (number and street) 2270 Colonial Blvd.

Check if different than previously reported. (ACC) Fort Myers FL 33907

2. **FEC IDENTIFICATION NUMBER** ▼ C C00385120 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day **PRE-Election** Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day **POST-Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2021 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2021

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

Type or Print Name of Treasurer

Signature of Treasurer Woodward, Allan, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 26 / 2022

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

GenesisCare USA Inc. Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		95321.00
(b) Cash on Hand at Beginning of Reporting Period.....	103082.00	
(c) Total Receipts (from Line 19)	0.00	7761.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	103082.00	103082.00
7. Total Disbursements (from Line 31).....	17000.00	17000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	86082.00	86082.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

GenesisCare USA Inc. Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	7631.00
(ii) Unitemized	0.00	130.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	7761.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	7761.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0.00	7761.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	7761.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	17000.00
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)) ..	17000.00	17000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17000.00	17000.00

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)	0.00	7761.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	7761.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GenesisCare USA Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mike Kelly For Congress		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021
Mailing Address PO Box 476		FEC Identification Number C00474189 Transaction ID : 47115106
City Lyndora	State PA	Zip Code 16045
Purpose of Disbursement Direct Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name Kelly, Mike, , Rep.,		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Direct Contribution <input type="checkbox"/> Memo Item
State: PA	District: 16	

Full Name (Last, First, Middle Initial) B. Rodney For Congress		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021
Mailing Address PO Box 344		FEC Identification Number C00521948 Transaction ID : 47115107
City Taylorville	State IL	Zip Code 62568
Purpose of Disbursement Direct Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name Davis, Rodney, , Rep.,		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Direct Contribution <input type="checkbox"/> Memo Item
State: IL	District: 13	

Full Name (Last, First, Middle Initial) C. Great Lakes PAC		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021
Mailing Address PO Box 1295		FEC Identification Number C00375584 Transaction ID : 47115108
City East Lansing	State MI	Zip Code 48826
Purpose of Disbursement Direct Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name		Category/Type 011
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) ▼	Direct Contribution <input type="checkbox"/> Memo Item
State:	District:	

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

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

9000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
GenesisCare USA Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Kurt Schrader For Congress		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021
Mailing Address PO Box 3314		FEC Identification Number C00446906 Transaction ID : 47115109
City Oregon City	State OR	Zip Code 97045
Purpose of Disbursement Direct Contribution		Category/Type 011
Candidate Name Schrader, Kurt, , Rep.,		Amount of Each Disbursement this Period 2000.00 Direct Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OR	District: 05	

Full Name (Last, First, Middle Initial) B. Bera For Congress		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021
Mailing Address PO Box 582496		FEC Identification Number C00461061 Transaction ID : 47115110
City Elk Grove	State CA	Zip Code 95758
Purpose of Disbursement Direct Contribution		Category/Type 011
Candidate Name Bera, Ami, , Rep., MD		Amount of Each Disbursement this Period 1500.00 Direct Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 07	

Full Name (Last, First, Middle Initial) C. Brian Fitzpatrick For All Of Us		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021
Mailing Address PO Box 939		FEC Identification Number C00607416 Transaction ID : 47115111
City Langhorne	State PA	Zip Code 19047
Purpose of Disbursement Direct Contribution		Category/Type 011
Candidate Name Fitzpatrick, Brian, , Rep.,		Amount of Each Disbursement this Period 1000.00 Direct Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 01	

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

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

4500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

GenesisCare USA Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brian Higgins For Congress

Mailing Address PO Box 28

City
Buffalo

State
NY

Zip Code
14220

Purpose of Disbursement

011

Category/
Type

Candidate Name

Higgins, Brian, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: NY District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2021

FEC Identification Number

C C00401034

Transaction ID : 47115112

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Paul Tonko For Congress

Mailing Address 911 Central Avenue
221

City
Albany

State
NY

Zip Code
12206

Purpose of Disbursement
Direct Contribution

011

Category/
Type

Candidate Name

Tonko, Paul, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: NY District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2021

FEC Identification Number

C C00450049

Transaction ID : 47115113

Amount of Each Disbursement this Period

1500.00
Direct Contribution

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

3500.00

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

17000.00