

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**
NEW MAJORITY FEDERAL PAC

ADDRESS (number and street) **2350 KERNER BLVD. , SUITE 250**
Check if different than previously reported. (ACC) **SAN RAFAEL CA 94901**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00387274 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 / / 2019 through / / 2019

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

Signature of Treasurer COLUMBO, MICHAEL, , , [Electronically Filed] Date / / 2019

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

NEW MAJORITY FEDERAL 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="2019"/>	<input type="text" value="13123.46"/>	<input type="text" value="13123.46"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="13123.46"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="36250.00"/>	<input type="text" value="36250.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="49373.46"/>	<input type="text" value="49373.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12320.52"/>	<input type="text" value="12320.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37052.94"/>	<input type="text" value="37052.94"/>
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="807.79"/>	

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

NEW MAJORITY FEDERAL 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).....	36250.00	36250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	36250.00	36250.00
(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)	36250.00	36250.00
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)).....▶	36250.00	36250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	36250.00	36250.00

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	7320.52	7320.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7320.52	7320.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
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)) ..	12320.52	12320.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12320.52	12320.52

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)	36250.00	36250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36250.00	36250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7320.52	7320.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7320.52	7320.52

**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 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
NEW MAJORITY FEDERAL PAC

A. COX, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 PERIMETER DRIVE
 City Schaumburg State IL Zip Code 60173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COX FINANCIAL GROUP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 01 / 22 / 2019
Transaction ID : INCA1255
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. KANE, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4323 VISTA DE LA TIERRA
 City Del Mar State CA Zip Code 92014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNERGY SPECIALISTS MEDICAL GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 25 / 2019
Transaction ID : INCA1263
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. KAHN, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 WEST PLAZA STREET #103
 City SOLANO BEACH State CA Zip Code 92075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENT HOLDINGS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 18 / 2019
Transaction ID : INCA1265
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00
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 16
<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)
NEW MAJORITY FEDERAL PAC

A. HANNA, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 POST
 City IRVINE State CA Zip Code 92618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HANNA CAPITAL MANAGEMENT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2019
Transaction ID : INCA1266
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. HANNA, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 POST
 City IRVINE State CA Zip Code 92618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HANNA CAPITAL MANAGEMENT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2019
Transaction ID : INCA1267
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. PROUGH, STEPHEN W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 HAZEL DRIVE
 City CORONA DEL MAR State CA Zip Code 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2019
Transaction ID : INCA1268
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 16
<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)
NEW MAJORITY FEDERAL PAC

A. RAMOS, FAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 WANDER STREET
 City Chula Vista State CA Zip Code 91915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED; FAMELA RAMOS Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **04 / 18 / 2019**
Transaction ID : INCA1271
 Amount of Each Receipt this Period 1250.00
 Memo Item

B. ZOSA, NOLI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6987 CAMINO PACHECO
 City San Diego State CA Zip Code 92111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENT HOLDINGS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **04 / 18 / 2019**
Transaction ID : INCA1270
 Amount of Each Receipt this Period 1250.00
 Memo Item

C. LOTSOFF, JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17702 CIRCA ORIENTE, #9510
 City Rancho Santa Fe State CA Zip Code 92067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 20 / 2019**
Transaction ID : INCA1273
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW MAJORITY FEDERAL PAC

A. BAILEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 B AVENUE
 City CORONADO State CA Zip Code 92188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF CORONADO/UNITED TECHNOLOGIES Occupation (for Individual) CITY COUNCIL MEMBER/FINANCIAL
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2019
Transaction ID : INCA1276
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. CAMPBELL, ROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 SOUTH BUNDY DRIVE, APT. 317
 City Los Angeles State CA Zip Code 90049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2019
Transaction ID : INCA1277
 Amount of Each Receipt this Period
 1250.00
 Memo Item

C. EARLY, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6420 WILSHIRE BOULEVARD
 17TH FLOOR
 City Los Angeles State CA Zip Code 90048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EARLY, SULLIVAN, WRIGHT, GIZER AND MCR Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2019
Transaction ID : INCA1278
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6250.00
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 10 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW MAJORITY FEDERAL PAC

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

Mailing Address **3431 W. LOMITA BLVD.**

City Torrance	State CA	Zip Code 90505
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) MICRONOVA MANUFACTURING, INC.	Occupation (for Individual) PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
06 / 27 / 2019

Transaction ID : INCA1279

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	36250.00

**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)
NEW MAJORITY FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
LEGAL SERVICES AND PAC ADMINISTRATION

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB1260
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
LEGAL SERVICES AND PAC ADMINISTRATION

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB1256
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
LEGAL SERVICES AND PAC ADMINISTRATION

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB1258
Amount of Each Disbursement this Period

Memo Item

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

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)
NEW MAJORITY FEDERAL PAC

A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1415 L STREET, SUITE 1200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement LEGAL SERVICES AND PAC ADMINISTRATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 15 / 2019

FEC Identification Number: C

Transaction ID : EXPB1262

Amount of Each Disbursement this Period: 1297.00

Memo Item

B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1415 L STREET, SUITE 1200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement LEGAL SERVICES AND PAC ADMINISTRATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2019

FEC Identification Number: C

Transaction ID : EXPB1264

Amount of Each Disbursement this Period: 491.50

Memo Item

C. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1415 L STREET, SUITE 1200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement LEGAL SERVICES AND PAC ADMINISTRATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 16 / 2019

FEC Identification Number: C

Transaction ID : EXPB1269

Amount of Each Disbursement this Period: 686.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2475.00

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)
NEW MAJORITY FEDERAL PAC

A. **NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1415 L STREET, SUITE 1200

M M M	/	D D D	/	Y Y Y Y Y
05		09		2019

City SACRAMENTO State CA Zip Code 95814

FEC Identification Number

Purpose of Disbursement
LEGAL SERVICES AND PAC ADMINISTRATION

C

Candidate Name

001
Category/ Type

Transaction ID : EXPB1272

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

543.00

Memo Item

B. **NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1415 L STREET, SUITE 1200

M M M	/	D D D	/	Y Y Y Y Y
06		13		2019

City SACRAMENTO State CA Zip Code 95814

FEC Identification Number

Purpose of Disbursement
LEGAL SERVICES AND PAC ADMINISTRATION

C

Candidate Name

001
Category/ Type

Transaction ID : EXPB1274

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

374.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

--

Memo Item

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

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

917.00

7320.52

**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)
NEW MAJORITY FEDERAL PAC

A. YOUNG KIM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 2186

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2019

City Fullerton State CA Zip Code 92837

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

C C00665638

Transaction ID : EXPB1275

Amount of Each Disbursement this Period

Candidate Name

KIM, YOUNG, , ,

5000.00

Office Sought: House Senate President
State: CA District: 39

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

Category/ Type

C

Amount of Each Disbursement this Period

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

Category/ Type

C

Amount of Each Disbursement this Period

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

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

5000.00

5000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 16
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW MAJORITY FEDERAL PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP			Nature of Debt (Purpose): LEGAL SERVICES AND PAC ADMINISTRATION
Mailing Address 1415 L STREET, SUITE 1200			
City SACRAMENTO	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 873.68	Transaction ID : PAYD1232	
Amount Incurred This Period 0.00	Payment This Period 873.68	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP			Nature of Debt (Purpose): LEGAL SERVICES AND PAC ADMINISTRATION
Mailing Address 1415 L STREET, SUITE 1200			
City SACRAMENTO	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 2588.34	Transaction ID : PAYD1250	
Amount Incurred This Period 0.00	Payment This Period 2588.34	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP			Nature of Debt (Purpose): LEGAL SERVICES AND PAC ADMINISTRATION
Mailing Address 1415 L STREET, SUITE 1200			
City SACRAMENTO	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 466.50	Transaction ID : PAYD1254	
Amount Incurred This Period 0.00	Payment This Period 466.50	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 16
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
NEW MAJORITY FEDERAL PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP			Nature of Debt (Purpose): LEGAL SERVICES AND PAC ADMINISTRATION
Mailing Address 1415 L STREET, SUITE 1200			
City SACRAMENTO	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD1280	
Amount Incurred This Period 807.79	Payment This Period 0.00	Outstanding Balance at Close of This Period 807.79

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	807.79
2) TOTALS This Period (last page this line number only)..... ▶	807.79
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	807.79