

# 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

E-PAC

ADDRESS (number and street) PO BOX 500

Check if different than previously reported. (ACC) GLEN FALLS NY 12801

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

C C00570945 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 checked="" 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 06 / 01 / 2020 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2020

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

HOBBS, CABELL, , ,

Type or Print Name of Treasurer

Signature of Treasurer HOBBS, CABELL, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 20 / 2020

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**E-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="2020"/>		187648.24
(b) Cash on Hand at Beginning of Reporting Period.....	132827.19	
(c) Total Receipts (from Line 19) .....	57535.31	251991.57
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	190362.50	439639.81
7. Total Disbursements (from Line 31).....	39747.63	289024.94
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	150614.87	150614.87
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**E-PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y 06 / 01 / 2020 To: M M / D D / Y Y Y Y Y 06 / 30 / 2020

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).....	15729.21	61479.21
(ii) Unitemized .....	12806.10	15822.90
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	28535.31	77302.11
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	19000.00	146000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	47535.31	223302.11
12. Transfers From Affiliated/Other Party Committees.....	10000.00	28689.46
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)).....▶	57535.31	251991.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	57535.31	251991.57

**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 .....	8747.63	88024.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8747.63	88024.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31000.00	201000.00
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)) ..	39747.63	289024.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39747.63	289024.94

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	47535.31	223302.11
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47535.31	223302.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	8747.63	88024.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8747.63	88024.94

**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 6 OF 45
	<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	

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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 02 / 2020  
**Transaction ID : SA11C.1652617**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. HUNT, R , THOMAS, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2640 E. BARNETT RD. PMB 233

City MEDFORD	State OR	Zip Code 97504-4301
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 02 / 2020  
**Transaction ID : SA11A.165264**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2020  
**Transaction ID : SA11C.165303148**

Amount of Each Receipt this Period  
12.50

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> 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 45
<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)  
**E-PAC**

**A. HUNT, R , THOMAS, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2640 E. BARNETT RD. PMB 233

City MEDFORD	State OR	Zip Code 97504-4301
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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 ▼  
212.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2020

**Transaction ID : SA11A.165405**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2020

**Transaction ID : SA11C.165303152**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. TRIER, DANA, L., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 WEST 76TH STREET 5A

City NEW YORK	State NY	Zip Code 10023-8222
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS POLK	Occupation (for Individual) ATTORNEY
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1416.68

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2020

**Transaction ID : SA11A.165409**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	262.50
<b>TOTAL</b> 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 45
	<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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2020

**Transaction ID : SA11C.16530347**

Amount of Each Receipt this Period  
166.67

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. EMERICH, BRIAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 152 SOUTH STAGE COACH LANE

City FALLBROOK	State CA	Zip Code 92028-2435
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.68

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2020

**Transaction ID : SA11A.165304**

Amount of Each Receipt this Period  
166.67

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2020

**Transaction ID : SA11C.16530386**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	166.67
<b>TOTAL</b> 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 9 OF 45
	<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)  
**E-PAC**

**A. VIGEN, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23642 CLOVER TRAIL  
 City CALABASAS State CA Zip Code 91302-2007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AIRESRING, INC Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 09 / 2020  
**Transaction ID : SA11A.165343**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 38222.11

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11C.165418168**  
 Amount of Each Receipt this Period 83.34  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. BENAUI, IRIT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4501 SPANISH OAK TRAIL  
 City AUSTIN State TX Zip Code 78731-5217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) STAY AT HOME MOM/ARCHITECT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1383.35

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165425**  
 Amount of Each Receipt this Period 83.34  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 333.34  
**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 45
<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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11C.165418176**

Amount of Each Receipt this Period  
83.34

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. EMERICH, BRIAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 152 SOUTH STAGE COACH LANE

City FALLBROOK	State CA	Zip Code 92028-2435
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.68

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11A.165433**

Amount of Each Receipt this Period  
83.34

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11C.165418183**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	83.34
<b>TOTAL</b> 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 11 OF 45
	<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)  
**E-PAC**

**A. HAYWORTH, NAN, A., , M.D.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 214 MCLAIN STREET  
 City MOUNT KISCO State NY Zip Code 10549-4931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165440**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 38222.11

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11C.165418199**  
 Amount of Each Receipt this Period 166.67  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. EMERICH, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 152 SOUTH STAGE COACH LANE  
 City FALLBROOK State CA Zip Code 92028-2435  
 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 ▼ 416.68

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165456**  
 Amount of Each Receipt this Period 166.67  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2966.67
<b>TOTAL</b> 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 45
	<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	

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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11C.165418205**

Amount of Each Receipt this Period  
166.67

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. BENAUI, IRIT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4501 SPANISH OAK TRAIL

City AUSTIN	State TX	Zip Code 78731-5217
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
SELF EMPLOYED STAY AT HOME MOM/ARCHITECT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1383.35

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11A.165462**

Amount of Each Receipt this Period  
166.67

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11C.165418212**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	166.67
<b>TOTAL</b> 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 45
	<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

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)  
**E-PAC**

**A. HUNT, R , THOMAS, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2640 E. BARNETT RD. PMB 233  
 City MEDFORD State OR Zip Code 97504-4301  
 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 ▼ 212.50

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165469**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 38222.11

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11C.165418213**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. HUNT, R , THOMAS, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2640 E. BARNETT RD. PMB 233  
 City MEDFORD State OR Zip Code 97504-4301  
 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 ▼ 212.50

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165470**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**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 45
	<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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11C.165418215**

Amount of Each Receipt this Period  
333.34

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. TRIER, DANA, L., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 205 WEST 76TH STREET 5A

City NEW YORK	State NY	Zip Code 10023-8222
------------------	-------------	------------------------

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

Name of Employer (for Individual) DAVIS POLK	Occupation (for Individual) ATTORNEY
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1416.68

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11A.165472**

Amount of Each Receipt this Period  
333.34

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2020

**Transaction ID : SA11C.165418216**

Amount of Each Receipt this Period  
333.34

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	333.34
<b>TOTAL</b> 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 45
	<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)  
**E-PAC**

**A. TRIER, DANA, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 205 WEST 76TH STREET 5A  
 City NEW YORK State NY Zip Code 10023-8222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DAVIS POLK Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1416.68

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165473**  
 Amount of Each Receipt this Period 333.34  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 38222.11

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11C.165418249**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. BENAUI, IRIT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4501 SPANISH OAK TRAIL  
 City AUSTIN State TX Zip Code 78731-5217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) STAY AT HOME MOM/ARCHITECT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1383.35

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165506**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	458.34
<b>TOTAL</b> 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 16 OF 45
	<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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2020

**Transaction ID : SA11C.165418255**

Amount of Each Receipt this Period  
125.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. TRIER, DANA, L., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 205 WEST 76TH STREET 5A

City NEW YORK	State NY	Zip Code 10023-8222
------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
DAVIS POLK ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1416.68

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2020

**Transaction ID : SA11A.165512**

Amount of Each Receipt this Period  
125.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2020

**Transaction ID : SA11C.165418256**

Amount of Each Receipt this Period  
125.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> 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 45
	<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)  
**E-PAC**

**A. TRIER, DANA, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 205 WEST 76TH STREET 5A  
 City NEW YORK State NY Zip Code 10023-8222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DAVIS POLK Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1416.68

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165513**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 38222.11

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11C.165418257**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. TRIER, DANA, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 205 WEST 76TH STREET 5A  
 City NEW YORK State NY Zip Code 10023-8222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DAVIS POLK Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1416.68

Date of Receipt 06 / 16 / 2020  
**Transaction ID : SA11A.165514**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> 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 45
	<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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2020

**Transaction ID : SA11C.165418283**

Amount of Each Receipt this Period  
83.34

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. BENA VI, IRIT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4501 SPANISH OAK TRAIL

City AUSTIN	State TX	Zip Code 78731-5217
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
SELF EMPLOYED STAY AT HOME MOM/ARCHITECT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1383.35

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2020

**Transaction ID : SA11A.165540**

Amount of Each Receipt this Period  
83.34

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2020

**Transaction ID : SA11C.186109350**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	83.34
<b>TOTAL</b> 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 45
	<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)  
**E-PAC**

**A. HUNT, R , THOMAS, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2640 E. BARNETT RD. PMB 233  
 City MEDFORD State OR Zip Code 97504-4301  
 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 ▼ 212.50

Date of Receipt 06 / 23 / 2020  
**Transaction ID : SA11A.186155**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 38222.11

Date of Receipt 06 / 23 / 2020  
**Transaction ID : SA11C.186109436**  
 Amount of Each Receipt this Period 1400.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. MCHUGH, BRENDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1445 16TH STREET APT 1101  
 City MIAMI BEACH State FL Zip Code 33139-2288  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1445 16TH STREET APT 1101 Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 06 / 23 / 2020  
**Transaction ID : SA11A.186241**  
 Amount of Each Receipt this Period 1400.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<b>TOTAL</b> 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 45
	<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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2020  
**Transaction ID : SA11C.186109464**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. BENAUI, IRIT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4501 SPANISH OAK TRAIL

City AUSTIN	State TX	Zip Code 78731-5217
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
SELF EMPLOYED STAY AT HOME MOM/ARCHITECT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1383.35

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2020  
**Transaction ID : SA11A.186269**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C. HOFFMAN, SHIRLEE, A., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 516 EAST 32ND STREET UNIT B

City CHICAGO	State IL	Zip Code 60616-4216
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020  
**Transaction ID : SA11A.177381**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> 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 45
<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)  
**E-PAC**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**38222.11**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11C.186279515**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. BENAUI, IRIT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **4501 SPANISH OAK TRAIL**

City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78731-5217</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
**SELF EMPLOYED STAY AT HOME MOM/ARCHITECT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1383.35**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11A.186320**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

EARMARKED FROM WINRED

**C. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**38222.11**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11C.186279614**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> 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 45
	<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)  
**E-PAC**

**A. WARD, KATHLEEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 89 OLD CREEK ROAD

City PALOS PARK	State IL	Zip Code 60464-1414
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11A.186419**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11C.186279617**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 4501 SPANISH OAK TRAIL

City AUSTIN	State TX	Zip Code 78731-5217
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) STAY AT HOME MOM/ARCHITECT
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1383.35

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11A.186422**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> 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 45
<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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020  
**Transaction ID : SA11C.186279718**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. FOUNTAIN, TINA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 2149

City LAKE PLACID	State NY	Zip Code 12946-6149
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
TEMPTEST CAPITAL VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020  
**Transaction ID : SA11A.188102**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**C. FOUNTAIN, KEVIN, F., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 2149, 35 TAYLOR WAY

City LAKE PLACID	State NY	Zip Code 12946-6149
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
TEMPEST CAPITAL LTD OWNER

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020  
**Transaction ID : SA11A.186523**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> 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 45
	<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)  
**E-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 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020  
**Transaction ID : SA11C.186279719**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. FOUNTAIN, TINA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 2149

City LAKE PLACID	State NY	Zip Code 12946-6149
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
TEMPTEST CAPITAL VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020  
**Transaction ID : SA11A.188103**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

**C. FOUNTAIN, KEVIN, F., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 2149, 35 TAYLOR WAY

City LAKE PLACID	State NY	Zip Code 12946-6149
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
TEMPEST CAPITAL LTD OWNER

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020  
**Transaction ID : SA11A.186524**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> 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 45
	<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)  
**E-PAC**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**38222.11**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11C.186590801**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. D'AMBRA , THOMAS, E., , PH.D.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **4290 FILER COVE ROAD**

City <b>BIG TORCH KEY</b>	State <b>FL</b>	Zip Code <b>33042-5907</b>
------------------------------	--------------------	-------------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11A.186605**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

EARMARKED FROM WINRED

**C. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**38222.11**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11C.186590828**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>5000.00</b>
<b>TOTAL</b> 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 45
	<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)  
**E-PAC**

**A. FOUNTAIN, KEVIN, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 2149, 35 TAYLOR WAY  
 City LAKE PLACID State NY Zip Code 12946-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TEMPEST CAPITAL LTD Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11A.186632**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. FOUNTAIN, TINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 2149  
 City LAKE PLACID State NY Zip Code 12946-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TEMPTEST CAPITAL Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11A.188104**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**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 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 38222.11

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11C.186590829**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> 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 45
	<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)  
**E-PAC**

**A. FOUNTAIN, TINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 2149  
 City LAKE PLACID State NY Zip Code 12946-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TEMPEST CAPITAL Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11A.188105**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**CONTRIBUTION**

**B. FOUNTAIN, KEVIN, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 2149, 35 TAYLOR WAY  
 City LAKE PLACID State NY Zip Code 12946-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TEMPEST CAPITAL LTD Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11A.186633**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**CONTRIBUTION**  
 EARMARKED FROM WINRED

**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 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 38222.11

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11C.186590888**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> 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 28 OF 45
	(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)  
**E-PAC**

**A. HAFNER, BRUCE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1A CARNEGIE AVENUE

City COLD SPRING HARBOR	State NY	Zip Code 11724-2017
----------------------------	-------------	------------------------

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

Name of Employer (for Individual) 1A CARNEGIE AVENUE	Occupation (for Individual) ATTORNEY
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11A.186692**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 22219-1891
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38222.11

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11C.186590930**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 50 COUNTRYSIDE LANE

City MILTON	State MA	Zip Code 02186-4434
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11A.186734**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> 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 45
	<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)  
**E-PAC**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
--------------------------	--------------------	-------------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**38222.11**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11C.186590941**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. BENAUI, IRIT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **4501 SPANISH OAK TRAIL**

City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78731-5217</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
**SELF EMPLOYED STAY AT HOME MOM/ARCHITECT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1383.35**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11A.186745**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

EARMARKED FROM WINRED

**C. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**38222.11**

Date of Receipt  
**06 / 30 / 2020**  
**Transaction ID : SA11C.186590951**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>25.00</b>
<b>TOTAL</b> 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 30 OF 45  
(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)  
**E-PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**BLACHMAN, YAAKOV, , ,**

Mailing Address **1475 PRESIDENT STREET**

City <b>KINGS COUNTY</b>	State <b>NY</b>	Zip Code <b>11213-4433</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>1475 PRESIDENT STREET</b>	Occupation (for Individual) <b>REAL ESTATE</b>
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**06 / 30 / 2020**

**Transaction ID : SA11A.186755**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**EARMARKED FROM WINRED**

**B.** 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

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>15729.21</b>

**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 31 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**E-PAC**

**A. AT&T INC FEDERAL PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 208 SOUTH AKARD STREET  
 SUITE 2701  
 City DALLAS State TX Zip Code 75202-4206  
 FEC ID number of contributing federal political committee. **C** C00109017  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 11 / 2020  
**Transaction ID : SA11C.161721**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. GENERAL MOTORS COMPANY PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 MASSACHUSETTS AVENUE, NORTHWEST  
 SUITE 400  
 City WASHINGTON State DC Zip Code 20001-1427  
 FEC ID number of contributing federal political committee. **C** C00076810  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 11 / 2020  
**Transaction ID : SA11C.161720**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**C. AMAZON PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 NEW JERSEY AVENUE NORTHWEST  
 SUITE 900  
 City WASHINGTON State DC Zip Code 20001-2027  
 FEC ID number of contributing federal political committee. **C** C00360354  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11C.177697**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00  
**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 32 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**E-PAC**

**A. AMERICAN HOTEL & LODGING PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 NEW YORK AVENUE, NORTHWEST  
SIXTH FLOOR

City WASHINGTON State DC Zip Code 20005-3917

FEC ID number of contributing federal political committee. **C** C00001198

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020

**Transaction ID : SA11C.177383**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C** C00469429

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020

**Transaction ID : SA11C.177696**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. COMCAST CORPORATION & NBC UNIVERSAL PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 JFK BOULEVARD  
49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2020

**Transaction ID : SA11C.177698**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	19000.00



**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 33 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**E-PAC**

**A. ELISE VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00630632

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
22297.32

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 03 / 2020  
**Transaction ID : SA12.154763**

Amount of Each Receipt this Period  
10000.00

Memo Item  
TRANSFER

**B. DAKE, AIMEE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 435

City SARATOGA SPRINGS	State NY	Zip Code 12866-0435
--------------------------	-------------	------------------------

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

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

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  
05 / 29 / 2020  
**Transaction ID : SA.154389.3.0014**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM ELISE VICTORY FUND

**C. DAKE, GARY, C., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 87 RAILROAD PLACE  
APARTMENT 407

City SARATOGA SPRINGS	State NY	Zip Code 12866-2144
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
STEWART'S SHOPS PRESIDENT

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  
05 / 29 / 2020  
**Transaction ID : SA.154388.3.0014**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM ELISE VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	10000.00

**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)  
**E-PAC**

**A. BB&T**

Full Name (Last, First, Middle Initial)

Mailing Address 2200 WILSON BLVD SUITE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 01 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12347

Amount of Each Disbursement this Period: 15.00

Memo Item

**B. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD #530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12350

Amount of Each Disbursement this Period: 27.79

Memo Item

**C. GOOGLE**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12366

Amount of Each Disbursement this Period: 30.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 72.79

**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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 09 / 2020
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.12351</b> Amount of Each Disbursement this Period 97.17
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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>B. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2020
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.12364</b> Amount of Each Disbursement this Period 42.83
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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>C. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2020
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.12365</b> Amount of Each Disbursement this Period 10.00
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**E-PAC**

**A. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT SVC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 10 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12357

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. ALBANY COUNTY AIRPORT**

Full Name (Last, First, Middle Initial)

Mailing Address 737 ALBANY SHAKER ROAD

City ALBANY State NY Zip Code 12211

Purpose of Disbursement PARKING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12361

Amount of Each Disbursement this Period: 18.00

Memo Item

**C. COMPLIANCE CONSULTING CO OF VIRGINIA LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12367

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1268.00

**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)  
**E-PAC**

**A. NORTH COUNTRY STRATEGIES LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 123 YORK AVENUE

City SARATOGA SPRINGS State NY Zip Code 12866

Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12362

Amount of Each Disbursement this Period: 2445.90

Memo Item

**B. THE PROSPER GROUP INC**

Full Name (Last, First, Middle Initial)

Mailing Address 150 WEST MARKET STREET

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12358

Amount of Each Disbursement this Period: 1100.00

Memo Item

**C. WHEELERHOUSE LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 415 WARNER STREET NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12355

Amount of Each Disbursement this Period: 2000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5545.90

**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)  
**E-PAC**

**A. BB&T**

Full Name (Last, First, Middle Initial)

Mailing Address 2200 WILSON BLVD SUITE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12348

Amount of Each Disbursement this Period: 3.00

Memo Item

**B. HEINTZ, KATHARINE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 7 GRACE AVENUE

City PLATTSBURGH State NY Zip Code 12801

Purpose of Disbursement ADMINISTRATIVE/FINANCE LABOR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12348

Amount of Each Disbursement this Period: 391.00

Memo Item

**C. THORP, MADISON, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 7 GRACE AVENUE

City PLATTSBURGH State NY Zip Code 12801

Purpose of Disbursement ADMINISTRATIVE/FINANCE LABOR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.12348

Amount of Each Disbursement this Period: 75.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 469.00

**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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2020
Mailing Address 300 FIRST STREET SE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.12360</b> Amount of Each Disbursement this Period 60.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGES		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>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2020
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.12352</b> Amount of Each Disbursement this Period 281.68
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2020
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.12353</b> Amount of Each Disbursement this Period 164.39
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	506.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**E-PAC**

Full Name (Last, First, Middle Initial)

**A. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.12363**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. BB&T**

Mailing Address 2200 WILSON BLVD SUITE 100

City  
ARLINGTON

State  
VA

Zip Code  
22201

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.12349**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR

City  
DALLAS

State  
TX

Zip Code  
75201

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.12356**

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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2020	
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.12354</b> Amount of Each Disbursement this Period [ ] 227.67	
City ARLINGTON	State VA	Zip Code 22209	Category/ Type [ ]
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2020	
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.12355</b> Amount of Each Disbursement this Period [ ] 393.90	
City ARLINGTON	State VA	Zip Code 22209	Category/ Type [ ]
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]	
City	State	Zip Code	Category/ Type [ ]
Purpose of Disbursement		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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 621.57
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 8747.63

**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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. NRCC</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2020
Mailing Address 320 FIRST STREET SE		FEC Identification Number C 00075820 <b>Transaction ID : SB23.12368</b> Amount of Each Disbursement this Period 6000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 020 <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>B. HAGAN FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2020
Mailing Address 10363 CHURCHILL DRIVE		FEC Identification Number C 00638411 <b>Transaction ID : SB23.12369</b> Amount of Each Disbursement this Period 5000.00
City POWELL	State OH	Zip Code 43065
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name <b>HAGAN, CHRISTINA, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: OH	District: 13	

Full Name (Last, First, Middle Initial) <b>C. JEANNE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2020
Mailing Address PO BOX 1504		FEC Identification Number C 00712794 <b>Transaction ID : SB23.12370</b> Amount of Each Disbursement this Period 5000.00
City WHEATON	State IL	Zip Code 60187
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name <b>IVES, JEANNE, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 06	

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

16000.00

**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 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)  
**E-PAC**

**A. VICTORIA SPARTZ FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 505

City NOBLESVILLE State IN Zip Code 46061

Purpose of Disbursement CONTRIBUTION

Candidate Name SPARTZ, VICTORIA, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: IN District: 05

Date of Disbursement: 06 / 11 / 2020

FEC Identification Number: C00737767  
Transaction ID : SB23.12371  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. YVETTE4CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 1111 10TH STREET #404

City ALAMOGORDO State NM Zip Code 88310

Purpose of Disbursement CONTRIBUTION

Candidate Name HERRELL, YVETTE, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: NM District: 02

Date of Disbursement: 06 / 11 / 2020

FEC Identification Number: C00655571  
Transaction ID : SB23.12372  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. ADRIENNE FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 205

City BANGOR State ME Zip Code 04402

Purpose of Disbursement CONTRIBUTION

Candidate Name BENNETT, ADRIENNE, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: ME District: 02

Date of Disbursement: 06 / 22 / 2020

FEC Identification Number: C00722108  
Transaction ID : SB23.12373  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

**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 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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. DONALD J TRUMP FOR PRESIDENT INC</b>			Date of Disbursement MM / DD / YYYY 06 / 29 / 2020	
Mailing Address 725 FIFTH AVENUE				
City NEW YORK		State NY	Zip Code 10022	
Purpose of Disbursement CONTRIBUTION			<input type="checkbox"/>	
Candidate Name <b>TRUMP, DONALD, J, ,</b>			Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District: 00		FEC Identification Number <b>C</b> C00580100 <b>Transaction ID : SB23.12374</b> Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. DONALD J TRUMP FOR PRESIDENT INC</b>			Date of Disbursement MM / DD / YYYY 06 / 29 / 2020	
Mailing Address 725 FIFTH AVENUE				
City NEW YORK		State NY	Zip Code 10022	
Purpose of Disbursement CONTRIBUTION			<input type="checkbox"/>	
Candidate Name <b>TRUMP, DONALD, J, ,</b>			Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District: 00		FEC Identification Number <b>C</b> C00580100 <b>Transaction ID : SB23.12375</b> Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. DONALD J TRUMP FOR PRESIDENT INC</b>			Date of Disbursement MM / DD / YYYY 06 / 29 / 2020	
Mailing Address 725 FIFTH AVENUE				
City NEW YORK		State NY	Zip Code 10022	
Purpose of Disbursement VOID CHECK- CONTRIBUTION REISSUED			<input type="checkbox"/>	
Candidate Name <b>TRUMP, DONALD, J, ,</b>			Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District: 00		FEC Identification Number <b>C</b> C00580100 <b>Transaction ID : SB23.12376</b> Amount of Each Disbursement this Period - 5000.00 <input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**E-PAC**

**A. DONALD J TRUMP FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement VOID CHECK- CONTRIBUTION REISSUED

Candidate Name TRUMP, DONALD, J, ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District: 00

Date of Disbursement: 06 / 29 / 2020

FEC Identification Number: C00580100

Transaction ID : SB23.12377

Amount of Each Disbursement this Period: - 5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	- 5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	31000.00