

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 HEALTH COACH PAC

ADDRESS (number and street) 22780 INDIAN CREEK DRIVE STE 100 DULLES VA 20166

2. FEC IDENTIFICATION NUMBER C00630038 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 (selected), July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2019 through 12 / 31 / 2019

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

Signature of Treasurer Meredith, Todd, , , [Electronically Filed] Date 01 / 31 / 2019

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Write or Type Committee Name

HEALTH COACH PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="8.60"/>	<input type="text" value="8.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="246.03"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2075.00"/>	<input type="text" value="6716.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2321.03"/>	<input type="text" value="6724.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1545.09"/>	<input type="text" value="5948.66"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="775.94"/>	<input type="text" value="775.94"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
HEALTH COACH PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1350.00	4150.00
(ii) Unitemized	725.00	2566.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2075.00	6716.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2075.00	6716.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2075.00	6716.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2075.00	6716.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	45.09	198.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	45.09	198.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1500.00	5750.00
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)) ..	1545.09	5948.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1545.09	5948.66

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2075.00	6716.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2075.00	6716.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	45.09	198.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45.09	198.66

**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 7
<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)
HEALTH COACH PAC

A. Anzalone, Marco, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 5th Ave,
 City New York State NY Zip Code 10016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Institute for Integrative Nutr Occupation (for Individual) Executive VP
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 11 / 01 / 2019
Transaction ID : SA11AI.4503
 Amount of Each Receipt this Period 350.00
 Memo Item

B. Gerasimo, Pilar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2145 Ford Parkway
 City St Paul State MN Zip Code 55116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pilar Gerasimo, LLC Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 11 / 20 / 2019
Transaction ID : SA11AI.4523
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Lowe, Jocelyn, Hong, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 New Jersey Avenue, S.E.
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Twenty-first Century Group, LL Occupation (for Individual) Lobbyist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 12 / 14 / 2019
Transaction ID : SA11AI.4530
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	1350.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HEALTH COACH PAC

A. DONALD M PAYNE JR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2406

M M M	/	D D D	/	Y Y Y Y Y
12		13		2019

City
NEWARK

State
NJ

Zip Code
07114

FEC Identification Number

Purpose of Disbursement
Political Contribution

C	C00519355
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Candidate Name

PAYNE, DONALD M., JR., , ,

Category/
Type

Transaction ID : SB23.4532

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

500.00

State: NJ District: 10

Memo Item

B. TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 189

M M M	/	D D D	/	Y Y Y Y Y
12		14		2019

City
NILES

State
OH

Zip Code
44446

FEC Identification Number

Purpose of Disbursement
political contribution

C	C00373464
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Candidate Name

RYAN, TIMOTHY, , ,

Category/
Type

Transaction ID : SB23.4534

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

1000.00

State: OH District: 13

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

State

Zip Code

FEC Identification Number

Purpose of Disbursement

C	
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Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

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State: District:

Memo Item

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

1500.00

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

1500.00
