

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
Good Friends PAC

ADDRESS (number and street) PO Box 1632
 Check if different than previously reported. (ACC)
Beaverton OR 97075

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00543116 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2020 through M M / D D / Y Y Y Y Y Y 09 / 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.
Jackson, Sue, , ,
Type or Print Name of Treasurer

Signature of Treasurer Jackson, Sue, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 15 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Good Friends 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"/>		10355.96
(b) Cash on Hand at Beginning of Reporting Period.....	8517.71	
(c) Total Receipts (from Line 19)	9600.00	13100.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	18117.71	23455.96
7. Total Disbursements (from Line 31).....	10398.20	15736.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	7719.51	7719.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Good Friends 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).....	9500.00	13000.00
(ii) Unitemized	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9600.00	13100.00
(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)	9600.00	13100.00
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)).....▶	9600.00	13100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	9600.00	13100.00

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	1898.20	3236.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1898.20	3236.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	12500.00
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)) ..	10398.20	15736.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10398.20	15736.45

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9600.00	13100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9600.00	13100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1898.20	3236.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1898.20	3236.45

**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 14
<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)
Good Friends PAC

A. Bangsund, David, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NW Lovejoy St
 Unit 711
 City Portland State OR Zip Code 97209-3571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 14 / 2020
Transaction ID : VVBYPQZVEV7
 Amount of Each Receipt this Period 1000.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9600.00

Date of Receipt 09 / 20 / 2020
Transaction ID : VVBYPQZVEV7E
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Kelly, James, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35393 Hwy 19
 City Kimberly State OR Zip Code 97848-6217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Rancher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 11 / 2020
Transaction ID : VVBYPQY9187
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<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)
Good Friends PAC

A. ActBlue

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2020

Transaction ID : VVBYFQY9187E

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Schechter, Dave, , ,

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

Mailing Address 15235 NW Red Cedar Ct

City Portland	State OR	Zip Code 97231-2673
------------------	-------------	------------------------

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

Name of Employer (for Individual) Nike Inc.	Occupation (for Individual) Product 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
08		31		2020

Transaction ID : VVBYFQX3P72

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

C. ActBlue

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2020

Transaction ID : VVBYFQX3P72E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

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

FOR LINE NUMBER: PAGE 8 OF 14
(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"/> 17
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NAME OF COMMITTEE (In Full)
Good Friends PAC

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

Mailing Address 209 SW Oak St

City Portland	State OR	Zip Code 97204-2714
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2020

Transaction ID : VVB Y F Q Y 9194

Amount of Each Receipt this Period
2500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2020

Transaction ID : VVB Y F Q Y 9194E

Amount of Each Receipt this Period
2500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	9500.00

**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)
Good Friends PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2020

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Merchant Fee

FEC Identification Number

C [Redacted]
Transaction ID : VVAZ7AQ1N
Amount of Each Disbursement this Period
[Redacted] 39.50

Candidate Name

Category/Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2020

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Merchant Fee

FEC Identification Number

C [Redacted]
Transaction ID : VVAZ7AQ2Y
Amount of Each Disbursement this Period
[Redacted] 296.25

Candidate Name

Category/Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2020

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Merchant Fee

FEC Identification Number

C [Redacted]
Transaction ID : VVAZ7AQ4C
Amount of Each Disbursement this Period
[Redacted] 39.50

Candidate Name

Category/Type

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

Memo Item

State: District:

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

[Redacted] 375.25

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

[Redacted]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 27 / 2020
Mailing Address 366 Summer St		FEC Identification Number C [] Transaction ID : VVAZ7AQ4C Amount of Each Disbursement this Period [] 3.95 <input type="checkbox"/> Memo Item
City Somerville	State MA	
Zip Code 02144-3132		FEC Identification Number C [] Transaction ID : VVAZ7AQ0S2 Amount of Each Disbursement this Period [] 600.00 <input type="checkbox"/> Memo Item
Purpose of Disbursement Merchant Fee		
Candidate Name		FEC Identification Number C [] Transaction ID : VVAZ7AQ2Y Amount of Each Disbursement this Period [] 619.00 <input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Blue Wave Political Partners		Date of Disbursement MM / DD / YYYY 07 / 16 / 2020
Mailing Address 119 1st Ave S Ste 320		FEC Identification Number C [] Transaction ID : VVAZ7AQ0S2 Amount of Each Disbursement this Period [] 600.00 <input type="checkbox"/> Memo Item
City Seattle	State WA	
Zip Code 98104-3424		FEC Identification Number C [] Transaction ID : VVAZ7AQ2Y Amount of Each Disbursement this Period [] 619.00 <input type="checkbox"/> Memo Item
Purpose of Disbursement Compliance Services		
Candidate Name		FEC Identification Number C [] Transaction ID : VVAZ7AQ2Y Amount of Each Disbursement this Period [] 619.00 <input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Morel Ink		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020
Mailing Address 4824 NE 42Nd Ave		FEC Identification Number C [] Transaction ID : VVAZ7AQ2Y Amount of Each Disbursement this Period [] 619.00 <input type="checkbox"/> Memo Item
City Portland	State OR	
Zip Code 97218-1661		FEC Identification Number C [] Transaction ID : VVAZ7AQ2Y Amount of Each Disbursement this Period [] 619.00 <input type="checkbox"/> Memo Item
Purpose of Disbursement Printing		
Candidate Name		FEC Identification Number C [] Transaction ID : VVAZ7AQ2Y Amount of Each Disbursement this Period [] 619.00 <input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

1222.95
[]

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)
Good Friends PAC

A. NGP VAN Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1101 15Th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Database Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 31 / 2020

FEC Identification Number: C

Transaction ID : VVAZ7AQ2Y

Amount of Each Disbursement this Period: 300.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	1898.20

**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)
Good Friends PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
09		25		2020

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement Contribution

C	C00575209
---	-----------

Candidate Name

Transaction ID : VVAZ7AQ6E/

CRAIG, ANGELA DAWN, , ,

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

1000.00

State: MN District: 02

Memo Item

B. CANDACE FOR 24

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 704027

M M M	/	D D D	/	Y Y Y Y Y
09		25		2020

City Dallas State TX Zip Code 75370-4027

FEC Identification Number

Purpose of Disbursement Contribution

C	C00702225
---	-----------

Candidate Name

Transaction ID : VVAZ7AQ6E/

VALENZUELA, CANDACE, , ,

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

2500.00

State: TX District: 24

Memo Item

C. DR KIM SCHRIER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3020 Issaquah Pine Lake Rd SE # 331

M M M	/	D D D	/	Y Y Y Y Y
09		25		2020

City Sammamish State WA Zip Code 98075-7253

FEC Identification Number

Purpose of Disbursement Contribution

C	C00652628
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Candidate Name

Transaction ID : VVAZ7AQ6E/

SCHRIER, KIM DR., , ,

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

1000.00

State: WA District: 08

Memo Item

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

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

4500.00

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**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)
Good Friends PAC

A. EASTMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 16411 Marcy St

City Omaha State NE Zip Code 68118-2727

Purpose of Disbursement Contribution

Candidate Name
EASTMAN, KARA, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: NE District: 02

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VVAZ7AQ6E8
Amount of Each Disbursement this Period

Memo Item

B. JACKIE GORDON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 456

City Copiague State NY Zip Code 11726-0456

Purpose of Disbursement Contribution

Candidate Name
GORDON, JACQUELINE, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify)

State: NY District: 02

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VVAZ7AQ6E8
Amount of Each Disbursement this Period

Memo Item

C. SPANBERGER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3121

City Glen Allen State VA Zip Code 23058-3121

Purpose of Disbursement Contribution

Candidate Name
SPANBERGER, ABIGAIL, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: VA District: 07

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VVAZ7AQ6E8
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 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)
Good Friends PAC

A. VOTE DONNA US CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2321

City Cedar Park State TX Zip Code 78630-2321

Purpose of Disbursement Contribution

Candidate Name IMAM, DONNA, , ,

Office Sought: House Senate President
State: TX District: 31

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: 09 / 25 / 2020

FEC Identification Number: C 00710475
Transaction ID : VVAZ7AQ6E
Amount of Each Disbursement this Period: 1000.00

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
State: District:

Disbursement For:
 Primary General Other (specify)

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
State: District:

Disbursement For:
 Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	8500.00