

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 OR AMENDED (N) (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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 06 01 2021 through 06 30 2021

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 07 20 2021

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

Table with 10 columns for Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2021"/>		285989.05
(b) Cash on Hand at Beginning of Reporting Period.....	293512.02	
(c) Total Receipts (from Line 19) .....	84761.26	214938.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	378273.28	500927.89
7. Total Disbursements (from Line 31).....	72104.27	194758.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	306169.01	306169.01
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 / 2021 To: M M / D D / Y Y Y Y Y 06 / 30 / 2021

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).....	9314.10	47529.60
(ii) Unitemized .....	7653.68	57060.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	16967.78	104590.42
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	26967.78	124590.42
12. Transfers From Affiliated/Other Party Committees.....	57793.48	90348.42
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)).....▶	84761.26	214938.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	84761.26	214938.84

**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 .....	17104.27	93308.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	17104.27	93308.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	100000.00
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	1450.00
(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	1450.00
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)) ..	72104.27	194758.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72104.27	194758.88

**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) .....	26967.78	124590.42
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1450.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26967.78	123140.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	17104.27	93308.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17104.27	93308.88

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

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

FOR LINE NUMBER: PAGE 6 OF 42  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. ARCHER, LYNNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 SAINT PETERS WALK  
 City SUGAR LAND State TX Zip Code 77479-2525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 01 / 2021  
**Transaction ID : SA11A.444880**  
 Amount of Each Receipt this Period - 250.00  
 Memo Item CONTRIBUTION  
 2021 AGGREGATE; CHARGED BACK

**B. ARCHER, LYNNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 SAINT PETERS WALK  
 City SUGAR LAND State TX Zip Code 77479-2525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 01 / 2021  
**Transaction ID : SA11A.444881**  
 Amount of Each Receipt this Period - 250.00  
 Memo Item CONTRIBUTION  
 2021 AGGREGATE; CHARGED BACK

**C. ARCHER, LYNNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 SAINT PETERS WALK  
 City SUGAR LAND State TX Zip Code 77479-2525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARCHER AUTO GROUP Occupation (for Individual) SECRETARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 01 / 2021  
**Transaction ID : SA11A.444882**  
 Amount of Each Receipt this Period - 125.00  
 Memo Item CONTRIBUTION  
 2021 AGGREGATE; CHARGED BACK

**SUBTOTAL** of Receipts This Page (optional)..... ▶ - 625.00  
**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 42
	<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 ▼  
96541.45

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2021  
**Transaction ID : SA11C.444794**

Amount of Each Receipt this Period  
1591.50

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. ALBERTI, KERRY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 12206 COUNTRY HILLS TER

City GLEN ALLEN	State VA	Zip Code 23059-5339
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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 ▼  
207.50

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2021  
**Transaction ID : SA11A.444841**

Amount of Each Receipt this Period  
12.50

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C. B, KIANOUSH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4831 SUSSEX DR

City SAN DIEGO	State CA	Zip Code 92116-2314
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
SDHC ASSET MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2021  
**Transaction ID : SA11A.444874**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	62.50
<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: PAGE 8 OF 42  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. CAMILLI, SHIRLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 543 APPLEWOOD ROAD  
 City CORRALES State NM Zip Code 87048-9118  
 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 ▼ 250.00

Date of Receipt 06 / 01 / 2021  
**Transaction ID : SA11A.444877**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. COLO, LAWRENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17518N1550 AVE  
 City GENESEO State IL Zip Code 61254-  
 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 ▼ 250.00

Date of Receipt 06 / 01 / 2021  
**Transaction ID : SA11A.444844**  
 Amount of Each Receipt this Period 12.50  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C. GULLIVER, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 701  
 City BLACK DIAMOND State WA Zip Code 98010-0701  
 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 ▼ 300.00

Date of Receipt 06 / 01 / 2021  
**Transaction ID : SA11A.444873**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 162.50  
**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 9 OF 42
	<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. KING, HARVEY, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 AALAPAPA PLACE  
 City KAILUA State HI Zip Code 96734-3118  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2021  
**Transaction ID : SA11A.444871**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**B. MCPHERSON, WARREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1727 SHAGBARK TRL  
 City MURFREESBORO State TN Zip Code 37130-1136  
 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 ▼ 217.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2021  
**Transaction ID : SA11A.444879**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**C. RICHARDS, MARY, D., MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1696 SE PORCH LAKE DR  
 City BELLAIRE State MI Zip Code 49615-  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2021  
**Transaction ID : SA11A.444875**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<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 10 OF 42
	<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 ▼  
96541.45

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

**Transaction ID : SA11C.444883**

Amount of Each Receipt this Period  
568.38

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. MUELLER, JOSEPH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 42 NASSAU ROAD

City POUGHKEEPSIE	State NY	Zip Code 12601-5640
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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 ▼  
284.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

**Transaction ID : SA11A.445020**

Amount of Each Receipt this Period  
5.00

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 ▼  
96541.45

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

**Transaction ID : SA11C.445053**

Amount of Each Receipt this Period  
772.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5.00
<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 11 OF 42
	<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. ALBERTI, KERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12206 COUNTRY HILLS TER  
 City GLEN ALLEN State VA Zip Code 23059-5339  
 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 ▼ 207.50

Date of Receipt 06 / 15 / 2021  
**Transaction ID : SA11A.445097**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. ALBERTI, KERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12206 COUNTRY HILLS TER  
 City GLEN ALLEN State VA Zip Code 23059-5339  
 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 ▼ 207.50

Date of Receipt 06 / 15 / 2021  
**Transaction ID : SA11A.445098**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C. MUELLER, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 NASSAU ROAD  
 City POUGHKEEPSIE State NY Zip Code 12601-5640  
 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 ▼ 284.78

Date of Receipt 06 / 15 / 2021  
**Transaction ID : SA11A.445095**  
 Amount of Each Receipt this Period 12.50  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.50
<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 12 OF 42
	<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 ▼ 850.00

Date of Receipt 06 / 15 / 2021  
**Transaction ID : SA11A.445108**  
 Amount of Each Receipt this Period 100.00  
 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 ▼ 96541.45

Date of Receipt 06 / 22 / 2021  
**Transaction ID : SA11C.452361**  
 Amount of Each Receipt this Period 1523.95  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**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) TEMPEST CAPITAL LTD Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.50

Date of Receipt 06 / 22 / 2021  
**Transaction ID : SA11A.452468**  
 Amount of Each Receipt this Period 12.50  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 112.50  
**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 13 OF 42
	<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. SHELTON, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4124 KINGSFERRY  
 City ARLINGTON State TX Zip Code 76016-3636  
 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 ▼ 750.00

Date of Receipt 06 / 22 / 2021  
**Transaction ID : SA11A.452494**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. WOOLFORD, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2660 PEACHTREE RD NW APT 32B  
 City ATLANTA State GA Zip Code 30305-3681  
 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 ▼ 215.50

Date of Receipt 06 / 22 / 2021  
**Transaction ID : SA11A.452469**  
 Amount of Each Receipt this Period 12.50  
 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 ▼ 96541.45

Date of Receipt 06 / 29 / 2021  
**Transaction ID : SA11C.452496**  
 Amount of Each Receipt this Period 1687.02  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional).....▶ 137.50  
**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 42
	<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. COLO, LAWRENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17518N1550 AVE  
 City GENESEO State IL Zip Code 61254-  
 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 ▼ 250.00

Date of Receipt 06 / 29 / 2021  
**Transaction ID : SA11A.452614**  
 Amount of Each Receipt this Period 12.50  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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 ▼ 212.50

Date of Receipt 06 / 29 / 2021  
**Transaction ID : SA11A.452627**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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) TEMPEST CAPITAL LTD Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.50

Date of Receipt 06 / 29 / 2021  
**Transaction ID : SA11A.452644**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	62.50
<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: PAGE 15 OF 42  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. IVERSON, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5200 BEVINGTON PLACE  
 City CHARLOTTE State NC Zip Code 28277-5504  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2021  
**Transaction ID : SA11A.452641**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. IVERSON, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5200 BEVINGTON PLACE  
 City CHARLOTTE State NC Zip Code 28277-5504  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2021  
**Transaction ID : SA11A.452650**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C. MUELLER, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 NASSAU ROAD  
 City POUGHKEEPSIE State NY Zip Code 12601-5640  
 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 ▼ 284.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2021  
**Transaction ID : SA11A.452529**  
 Amount of Each Receipt this Period 2.28  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 52.28  
**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 16 OF 42
	<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. RICHARDSON, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 855 MANZANITA ST.  
 City PORTOLA State CA Zip Code 96122-9542  
 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 ▼ 350.00

Date of Receipt 06 / 29 / 2021  
**Transaction ID : SA11A.452643**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. RICHARDS, MARY, D., MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1696 SE PORCH LAKE DR  
 City BELLAIRE State MI Zip Code 49615-  
 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 ▼ 300.00

Date of Receipt 06 / 29 / 2021  
**Transaction ID : SA11A.452652**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C. HAAKE, TIMOTHY, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5300 OCEAN BLVD APT 601  
 City SARASOTA State FL Zip Code 34242-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOLE PROPRIETOR Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.450686**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2575.00
<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 42
	<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. LEMUNYON, GLENN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1350 BEVERLY ROAD  
 SUITE 115  
 City MCLEAN State VA Zip Code 22101-3917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LEMUNYON GROUP LLC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.450687**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**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 ▼ 96541.45

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11C.452657**  
 Amount of Each Receipt this Period 7882.43  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. B, KIANOUSH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4831 SUSSEX DR  
 City SAN DIEGO State CA Zip Code 92116-2314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SDHC Occupation (for Individual) ASSET MANAGEMENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.452793**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 1050.00  
**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 18 OF 42
	<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. DAMON, ALBERT, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 PINE HILL RD  
 City WAKEFIELD State RI Zip Code 02879-2824  
 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 ▼ 318.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2021  
**Transaction ID : SA11A.452668**  
 Amount of Each Receipt this Period 1.82  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. DAMON, ALBERT, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 PINE HILL RD  
 City WAKEFIELD State RI Zip Code 02879-2824  
 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 ▼ 318.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2021  
**Transaction ID : SA11A.452765**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**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) TEMPEST CAPITAL LTD Occupation (for Individual) OWNER  
 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 / 30 / 2021  
**Transaction ID : SA11A.452775**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	51.82
<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 42
	<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. FRANKLIN, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12500 SAN PEDRO AVE  
 City SAN ANTONIO State TX Zip Code 78216-2858  
 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 ▼ 5000.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.452802**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. GULLIVER, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 701  
 City BLACK DIAMOND State WA Zip Code 98010-0701  
 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 ▼ 300.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.452792**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C. IVERSON, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5200 BEVINGTON PLACE  
 City CHARLOTTE State NC Zip Code 28277-5504  
 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 ▼ 250.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.452772**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5075.00
<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 20 OF 42  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. KING, HARVEY, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 AALAPAPA PLACE  
 City KAILUA State HI Zip Code 96734-3118  
 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 ▼ 500.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.452791**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. MUELLER, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 NASSAU ROAD  
 City POUGHKEEPSIE State NY Zip Code 12601-5640  
 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 ▼ 284.78

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.452701**  
 Amount of Each Receipt this Period 5.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C. MUELLER, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 NASSAU ROAD  
 City POUGHKEEPSIE State NY Zip Code 12601-5640  
 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 ▼ 284.78

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11A.452769**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 80.00  
**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 21 OF 42
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
PIERCE, GROVER, L., MR.,

Mailing Address 406 N CENTER ST

City WILLOW SPRINGS State MO Zip Code 65793-1334

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 ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2021

Transaction ID : SA11A.452801

Amount of Each Receipt this Period  
250.00

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

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9314.10

**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 42
<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. ANHEUSER-BUSCH COMPANIES INC. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address ONE BUSCH PLACE  
 202-7  
 City SAINT LOUIS State MO Zip Code 63118-1849  
 FEC ID number of contributing federal political committee. **C** C00034488  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2021  
**Transaction ID : SA11C.450688**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. NATIONAL AUTOMOBILE DEALERS ASSOCIATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 412 FIRST STREET SOUTHEAST  
 City WASHINGTON State DC Zip Code 20003-1804  
 FEC ID number of contributing federal political committee. **C** C00040998  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2021  
**Transaction ID : SA11C.450689**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
**CONTRIBUTION**

**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 / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

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

**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 23 OF 42
<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 ▼  
90348.42

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2021  
**Transaction ID : SA12.450759**

Amount of Each Receipt this Period  
57793.48

Memo Item  
TRANSFER

**B. BANKS, KEITH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 20 HOLTON LANE

City ESSEX FELS	State NJ	Zip Code 07021-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
BANK OF AMERICA VICE CHAIRMAN

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  
06 / 22 / 2021  
**Transaction ID : SA.447623.3.0019**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM ELISE VICTORY FUND

**C. CAEDDU, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 11520 OLD RANCH ROAD

City LOS ALTOS HILLS	State CA	Zip Code 94024-6313
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
DAG VENTURES INVESTOR

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  
06 / 30 / 2021  
**Transaction ID : SA.450553.3.0019**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM ELISE VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	57793.48
<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 42
<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. CARRION, JOSE, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 CALLE CERVANTES  
 City SAN JUAN State PR Zip Code 00907-1962  
 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 ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2021  
**Transaction ID : SA.436285.3.0019**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

**B. CUCCI, CLAIRE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 48 INLET TERRACE  
 City EAST BRUNSWICK State NJ Zip Code 08816-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PARK CHATEAU Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2021  
**Transaction ID : SA.438559.3.0019**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

**C. D'AMBRA, CONSTANCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4290 FILER COVE ROAD  
 City BIG TORCH KEY State FL Zip Code 33042-5907  
 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 ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2021  
**Transaction ID : SA.450670.3.0019**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 25 OF 42  
(check only one)

<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. 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 BIG TORCH KEY	State FL	Zip Code 33042-5907
-----------------------	-------------	------------------------

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

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

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
06	/	03	/	2021

**Transaction ID : SA.438447.3.0019**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM ELISE VICTORY FUND

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

Mailing Address 624 EAGLE WATCH LANE

City OSPREY	State FL	Zip Code 34229-9326
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) COMMUNITY VOLUNTEER
---	--

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
06	/	07	/	2021

**Transaction ID : SA.438528.3.0019**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM ELISE VICTORY FUND

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

Mailing Address 795 HULLS FARM ROAD

City FAIRFIELD	State CT	Zip Code 06890-1029
-------------------	-------------	------------------------

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

Name of Employer (for Individual) FIRST FINANCIAL BANK	Occupation (for Individual) BANKER
---	---------------------------------------

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
06	/	15	/	2021

**Transaction ID : SA.443412.3.0019**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM ELISE VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 26 OF 42
<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. HERMAN, RUSSELL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 AVENUE OF TWO RIVERS SOUTH  
 City RUMSON State NJ Zip Code 07760-1812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WHITE PINE CAPITAL MANAGEMENT Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 06 / 07 / 2021  
**Transaction ID : SA.438525.3.0019**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

**B. LANGER, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 BRIARCLIFF ROAD  
 City MONTVILLE State NJ Zip Code 07045-8606  
 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 5000.00

Date of Receipt 06 / 09 / 2021  
**Transaction ID : SA.440912.3.0019**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

**C. MAURILLO, GAIL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 GORDON RD  
 City ESSEX FELLS State NJ Zip Code 07021-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PARK SAVOY Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 06 / 08 / 2021  
**Transaction ID : SA.438558.3.0019**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 27 OF 42
<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. MAURILLO, SALLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 DEVON ROAD  
 City ESSEX FELLS State NJ Zip Code 07021-1715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PARK SAVOY Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 08 / 2021  
**Transaction ID : SA.438562.3.0019**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

**B. RIVERA, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 S PALM AVE UNIT 1102  
 City SARASOTA State FL Zip Code 34236-6891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RESTAURATEUR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA.450465.3.0019**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

**C. ROBSON, EDWARD, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9532 EAST RIGGS ROAD  
 City SUN LAKES State AZ Zip Code 85248-7463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROBSON COMMUNITIES Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 06 / 28 / 2021  
**Transaction ID : SA.448183.3.0019**  
 Amount of Each Receipt this Period 4200.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ELISE VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	57793.48

**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. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2021
Mailing Address 2200 WILSON BLVD SUITE 100		FEC Identification Number <b>C</b> Transaction ID : <b>SB21B.6789</b> Amount of Each Disbursement this Period 17.00
City ARLINGTON	State VA	
Zip Code 22201	Purpose of Disbursement BANK FEES	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2021
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number <b>C</b> Transaction ID : <b>SB21B.6794</b> Amount of Each Disbursement this Period 97.97
City ARLINGTON	State VA	
Zip Code 22209	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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>C. MASON STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2021
Mailing Address 219 E HOWELL AVENUE		FEC Identification Number <b>C</b> Transaction ID : <b>SB21B.6801</b> Amount of Each Disbursement this Period 3500.00
City ALEXANDRIA	State VA	
Zip Code 22301	Purpose of Disbursement FINANCE CONSULTING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3614.97
<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. 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 / 03 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6790

Amount of Each Disbursement this Period: 1.00

Memo Item

**B. 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 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6818

Amount of Each Disbursement this Period: 36.00

Memo Item

**C. 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 / 08 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6795

Amount of Each Disbursement this Period: 63.84

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 100.84

**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. 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 / 09 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6800

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. STAPLES**

Full Name (Last, First, Middle Initial)

Mailing Address 3301 RICHMOND HWY

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6809

Amount of Each Disbursement this Period: 109.76

Memo Item

**C. 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 / 15 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6796

Amount of Each Disbursement this Period: 38.54

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 648.30

**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 / 2021
Mailing Address 300 FIRST STREET SE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6802</b> Amount of Each Disbursement this Period [ ] 1287.97
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. COLONIAL PARKING</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2021
Mailing Address 1050 THOMAS JEFFERSON STREET NW SU		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6813</b> Amount of Each Disbursement this Period [ ] 22.00
City WASHINGTON	State DC	Zip Code 20007
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. COMPLIANCE CONSULTING CO OF VIRGINIA LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2021
Mailing Address PO BOX 365		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6793</b> Amount of Each Disbursement this Period [ ] 1000.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING		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).....▶	[ ] 2309.97
<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. 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 / 22 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6797

Amount of Each Disbursement this Period: 94.43

Memo Item

**B. CORTESE, WILLIAM, R, , JR**

Full Name (Last, First, Middle Initial)

Mailing Address 5 WESTWOOD DRIVE

City SANDY HOOK State CT Zip Code 06482

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 23 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6810

Amount of Each Disbursement this Period: 2000.00

Memo Item

**C. CORTESE, WILLIAM, R, , JR**

Full Name (Last, First, Middle Initial)

Mailing Address 5 WESTWOOD DRIVE

City SANDY HOOK State CT Zip Code 06482

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 23 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6814

Amount of Each Disbursement this Period: 992.03

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3086.46

**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)

**A. HOLIDAY INN**

Mailing Address 550 C STREET SW

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2021

FEC Identification Number

C  
Transaction ID : SB21BUV9.61  
Amount of Each Disbursement this Period  
992.03

Memo Item

Full Name (Last, First, Middle Initial)

**B. ZELLER, CHRISTOPHER, , ,**

Mailing Address 210 WOODLAND STREET

City SOUTH GLASTONBURY State CT Zip Code 06073

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2021

FEC Identification Number

C  
Transaction ID : SB21B.6811  
Amount of Each Disbursement this Period  
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ZELLER, CHRISTOPHER, , ,**

Mailing Address 210 WOODBURY STREET

City GLASTONBURY State CT Zip Code 06073

Purpose of Disbursement  
TRAVEL- MILEAGE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2021

FEC Identification Number

C  
Transaction ID : SB21B.6815  
Amount of Each Disbursement this Period  
346.80

NO ITEMIZATION NECESSARY

Memo Item

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

1846.80

**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. WHOLE FOODS MARKET**

Full Name (Last, First, Middle Initial)

Mailing Address 101 H STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 23 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6803

Amount of Each Disbursement this Period: 6.11

Memo Item

**B. 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 / 24 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6791

Amount of Each Disbursement this Period: 2.00

Memo Item

**C. CARMINES**

Full Name (Last, First, Middle Initial)

Mailing Address 425 7TH STREET NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 24 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6804

Amount of Each Disbursement this Period: 619.24

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 627.35

**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. CARMINES</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2021	
Mailing Address 425 7TH STREET NW		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6806</b>	
City WASHINGTON	State DC	Zip Code 20004	Amount of Each Disbursement this Period [ ] 389.69
Purpose of Disbursement FOOD/BEVERAGES		Category/Type [ ]	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) <b>B. SUBWAY</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2021	
Mailing Address 325 BIC DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6805</b>	
City MILFORD	State CT	Zip Code 06461	Amount of Each Disbursement this Period [ ] 8.15
Purpose of Disbursement FOOD/BEVERAGES		Category/Type [ ]	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2021	
Mailing Address 2200 WILSON BLVD SUITE 100		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6792</b>	
City ARLINGTON	State VA	Zip Code 22201	Amount of Each Disbursement this Period [ ] 30.00
Purpose of Disbursement BANK FEES		Category/Type [ ]	Memo Item <input type="checkbox"/>
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:			

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

427.84

**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. HYATT REGENCY CAMBRIDGE</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2021
Mailing Address 100 HERON BLVD US-50		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6816</b> Amount of Each Disbursement this Period [ ] 1826.39
City CAMBRIDGE	State MD	Zip Code 21613
Purpose of Disbursement TRAVEL/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. HYATT REGENCY CAMBRIDGE</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2021
Mailing Address 100 HERON BLVD US-50		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6817</b> Amount of Each Disbursement this Period [ ] 2107.23
City CAMBRIDGE	State MD	Zip Code 21613
Purpose of Disbursement TRAVEL/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>C. MANGIALARDO'S</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2021
Mailing Address 1317 PENNSYLVANIA AVE SE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6807</b> Amount of Each Disbursement this Period [ ] 32.23
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3965.85
<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. SAFEWAY**

Mailing Address 415 14TH STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
FOOD/BEVERAGES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6808

Amount of Each Disbursement this Period

[REDACTED] 5.82

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 715 D STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6812

Amount of Each Disbursement this Period

[REDACTED] 11.93

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6798

Amount of Each Disbursement this Period

[REDACTED] 86.51

Memo Item

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

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

[REDACTED] 104.26

[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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021	
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [ ]	
City ARLINGTON	State VA	Zip Code 22209	Transaction ID : <b>SB21B.6799</b>
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	Amount of Each Disbursement this Period 371.63
Candidate Name		<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>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	371.63
<b>TOTAL</b> This Period (last page this line number only).....▶	17104.27

**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. ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 50

M M M	/	D D D	/	Y Y Y Y Y
06		08		2021

City BALLWIN State MO Zip Code 63022

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00495846
---	-----------

Candidate Name WAGNER, ANN, , ,

Category/Type

Transaction ID : SB23.6820

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: MO District: 02

5000.00
---------

Memo Item

**B. CLAUDIA TENNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 244

M M M	/	D D D	/	Y Y Y Y Y
06		09		2021

City CLINTON State NY Zip Code 13323

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00632828
---	-----------

Candidate Name TENNEY, CLAUDIA, , ,

Category/Type

Transaction ID : SB23.6821

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: NY District: 22

5000.00
---------

Memo Item

**C. NICOLE FOR NEW YORK**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 60487

M M M	/	D D D	/	Y Y Y Y Y
06		17		2021

City STATEN ISLAND State NY Zip Code 10306

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00694778
---	-----------

Candidate Name MALLIOTAKIS, NICOLE, , ,

Category/Type

Transaction ID : SB23.6822

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: NY District: 11

5000.00
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Memo Item

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

15000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. BICE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2021
Mailing Address PO BOX 21315		FEC Identification Number C 00703843 <b>Transaction ID : SB23.6823</b>
City OKLAHOMA CITY	State OK	Zip Code 73156
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>BICE, STEPHANIE, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>B. DIANA FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2021
Mailing Address PO BOX 7208		FEC Identification Number C 00741090 <b>Transaction ID : SB23.6824</b>
City KINGSPORT	State TN	Zip Code 37664
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>HARSHBARGER, DIANA, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TN	District: 01	

Full Name (Last, First, Middle Initial) <b>C. BETH VAN DUYN FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address PO BOX 630167		FEC Identification Number C 00714865 <b>Transaction ID : SB23.6825</b>
City IRVING	State TX	Zip Code 75063
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>DUYNE, BETH, VAN, ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TX	District: 24	

**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. ELISE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address PO BOX 500		FEC Identification Number C 00547893 <b>Transaction ID : SB23.6819</b>
City GLEN FALLS	State NY	Zip Code 12801
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>STEFANIK, ELISE, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. ELISE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address PO BOX 500		FEC Identification Number C 00547893 <b>Transaction ID : SB23.6829</b>
City GLEN FALLS	State NY	Zip Code 12801
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>STEFANIK, ELISE, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>C. NANCY MACE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address 295 SEVEN FARMS DRIVE STE C-186		FEC Identification Number C 00710103 <b>Transaction ID : SB23.6826</b>
City CHARLESTON	State SC	Zip Code 29492
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>MACE, NANCY, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC	District: 01	

**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. SALAZAR FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address PO BOX 677		FEC Identification Number C 000714261 <b>Transaction ID : SB23.6827</b>
City SHIRLEY	State NY	Zip Code 11967
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>SALAZAR, MARIA, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 27	

Full Name (Last, First, Middle Initial) <b>B. YOUNG KIM FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address PO BOX 2186		FEC Identification Number C 000665638 <b>Transaction ID : SB23.6828</b>
City FULLERTON	State CA	Zip Code 92837
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>KIM, YOUNG, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 39	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

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

10000.00

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

55000.00