

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Nixon Peabody LLP 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"/>		<input type="text" value="38746.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="47513.84"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4793.00"/>	<input type="text" value="22538.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="52306.84"/>	<input type="text" value="61284.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8970.79"/>	<input type="text" value="17948.93"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43336.05"/>	<input type="text" value="43336.05"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Nixon Peabody LLP PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2925.00	12354.00
(ii) Unitemized	1868.00	10184.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4793.00	22538.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4793.00	22538.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4793.00	22538.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4793.00	22538.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1170.79	1898.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1170.79	1898.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7800.00	16050.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8970.79	17948.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8970.79	17948.93

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4793.00	22538.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4793.00	22538.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1170.79	1898.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1170.79	1898.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. ANDERSON, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 SPRUCE STREET, APT. 3
 City BOSTON State MA Zip Code 02108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5861
 Amount of Each Receipt this Period 72.00
 Memo Item

B. BAND, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13608 MOUNT PROSPECT DRIVE
 City ROCKVILLE State MD Zip Code 20850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 498.00

Date of Receipt 07 / 29 / 2021
Transaction ID : SA11AI.5807
 Amount of Each Receipt this Period 86.00
 Memo Item

C. BAND, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13608 MOUNT PROSPECT DRIVE
 City ROCKVILLE State MD Zip Code 20850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5862
 Amount of Each Receipt this Period 87.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	245.00
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 21
	<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)
Nixon Peabody LLP PAC

A. BURNHAM, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 KIEFER RIDGE DRIVE
 City BALLWIN State MO Zip Code 63021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 07 / 29 / 2021
Transaction ID : SA11AI.5810
 Amount of Each Receipt this Period 79.00
 Memo Item

B. BURNHAM, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 KIEFER RIDGE DRIVE
 City BALLWIN State MO Zip Code 63021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5865
 Amount of Each Receipt this Period 78.00
 Memo Item

C. COHEN, ALLAN, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 KATHLEEN DR
 City SYOSSET State NY Zip Code 11791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt 07 / 29 / 2021
Transaction ID : SA11AI.5813
 Amount of Each Receipt this Period 64.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	221.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<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)
Nixon Peabody LLP PAC

A. COHEN, ALLAN, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 KATHLEEN DR
 City SYOSSET State NY Zip Code 11791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5868
 Amount of Each Receipt this Period 63.00
 Memo Item

B. COHEN, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 LAURUS LANE
 City NEWTON State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt 07 / 29 / 2021
Transaction ID : SA11AI.5814
 Amount of Each Receipt this Period 127.00
 Memo Item

C. COHEN, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 LAURUS LANE
 City NEWTON State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5869
 Amount of Each Receipt this Period 127.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	317.00
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 9 OF 21
	<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)
Nixon Peabody LLP PAC

A. DORAN, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 7TH STREET, NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 864.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2021
Transaction ID : SA11AI.5816
 Amount of Each Receipt this Period
 432.00
 Memo Item

B. DORAN, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 7TH STREET, NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1296.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2021
Transaction ID : SA11AI.5871
 Amount of Each Receipt this Period
 432.00
 Memo Item

C. EGAN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 173 BROMPTON ROAD
 City GARDEN CITY State NY Zip Code 11530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2021
Transaction ID : SA11AI.5872
 Amount of Each Receipt this Period
 76.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	940.00
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 10 OF 21
	<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)
Nixon Peabody LLP PAC

A. FLANAGAN, BRIAN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 ALPINE DRIVE
 City ROCHESTER State NY Zip Code 14618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5873
 Amount of Each Receipt this Period 36.00
 Memo Item

B. GORDON, JILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 S HEWITT ST, APT 143
 City LOS ANGELES State CA Zip Code 90013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 30 / 2021
Transaction ID : SA11AI.5855
 Amount of Each Receipt this Period 48.00
 Memo Item

C. GORDON, JILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 S HEWITT ST, APT 143
 City LOS ANGELES State CA Zip Code 90013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5875
 Amount of Each Receipt this Period 48.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	132.00
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 11 OF 21
	<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)
Nixon Peabody LLP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GORDON, JILL, , ,			Date of Receipt
Mailing Address 530 S HEWITT ST, APT 143			<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2021"/>
City LOS ANGELES	State CA	Zip Code 90013	Transaction ID : SA11AI.5903
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="48.00"/>
Name of Employer (for Individual) NIXON PEABODY LLP		Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="336.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GORDON, JILL, , ,			Date of Receipt
Mailing Address 530 S HEWITT ST, APT 143			<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2021"/>
City LOS ANGELES	State CA	Zip Code 90013	Transaction ID : SA11AI.5937
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="48.00"/>
Name of Employer (for Individual) NIXON PEABODY LLP		Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="384.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KEEFE, CHRISTOPHER, , ,			Date of Receipt
Mailing Address 118 MANNING STREET			<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2021"/>
City NEEDHAM	State MA	Zip Code 02492	Transaction ID : SA11AI.5877
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="92.00"/>
Name of Employer (for Individual) NIXON PEABODY LLP		Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="276.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="188.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 21
	<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)
Nixon Peabody LLP PAC

A. KRAVITZ, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 WILLARD ROAD
 City BROOKLINE State MA Zip Code 02445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5879
 Amount of Each Receipt this Period 78.00
 Memo Item

B. LEVY, SETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 LARIAT COURT
 City SAGLE State ID Zip Code 83860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5882
 Amount of Each Receipt this Period 91.00
 Memo Item

C. PARTIGAN, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1803 CLOVERLAWN COURT
 City MCLEAN State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 339.00

Date of Receipt 07 / 29 / 2021
Transaction ID : SA11AI.5834
 Amount of Each Receipt this Period 51.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
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 13 OF 21
	<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)
Nixon Peabody LLP PAC

A. PARTIGAN, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1803 CLOVERLAWN COURT
 City MCLEAN State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 08 / 31 / 2021
Transaction ID : SA11AI.5849
 Amount of Each Receipt this Period 51.00
 Memo Item

B. PARTIGAN, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1803 CLOVERLAWN COURT
 City MCLEAN State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 09 / 30 / 2021
Transaction ID : SA11AI.5857
 Amount of Each Receipt this Period 51.00
 Memo Item

C. PARTIGAN, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1803 CLOVERLAWN COURT
 City MCLEAN State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 492.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5886
 Amount of Each Receipt this Period 51.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	153.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 21
	<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)
Nixon Peabody LLP PAC

A. PARTIGAN, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1803 CLOVERLAWN COURT
 City MCLEAN State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 543.00

Date of Receipt **11 / 29 / 2021**
Transaction ID : SA11AI.5905
 Amount of Each Receipt this Period 51.00
 Memo Item

B. PARTIGAN, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1803 CLOVERLAWN COURT
 City MCLEAN State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 594.00

Date of Receipt **12 / 30 / 2021**
Transaction ID : SA11AI.5939
 Amount of Each Receipt this Period 51.00
 Memo Item

C. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt **10 / 29 / 2021**
Transaction ID : SA11AI.5890
 Amount of Each Receipt this Period 26.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	128.00
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 15 OF 21
	<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)
Nixon Peabody LLP PAC

A. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 248.00

Date of Receipt 11 / 29 / 2021
Transaction ID : SA11AI.5907
 Amount of Each Receipt this Period 26.00
 Memo Item

B. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.00

Date of Receipt 12 / 30 / 2021
Transaction ID : SA11AI.5941
 Amount of Each Receipt this Period 26.00
 Memo Item

C. WEIKERT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 TIGER TAIL COURT
 City ORINDA State CA Zip Code 94563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 07 / 29 / 2021
Transaction ID : SA11AI.5844
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	112.00
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 16 OF 21
	<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)
Nixon Peabody LLP PAC

A. WEIKERT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 TIGER TAIL COURT
 City ORINDA State CA Zip Code 94563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5900
 Amount of Each Receipt this Period 61.00
 Memo Item

B. ZUBIAGO, STEPHEN, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 MIST OAK DRIVE
 City EACH GREENWICH State RI Zip Code 02818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLU Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 323.00

Date of Receipt 07 / 29 / 2021
Transaction ID : SA11AI.5845
 Amount of Each Receipt this Period 104.00
 Memo Item

C. ZUBIAGO, STEPHEN, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 MIST OAK DRIVE
 City EACH GREENWICH State RI Zip Code 02818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLU Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 10 / 29 / 2021
Transaction ID : SA11AI.5901
 Amount of Each Receipt this Period 104.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	269.00
TOTAL This Period (last page this line number only).....	2925.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial)

A. JP MORGAN CHASE BANK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	2	1

Mailing Address CHASE SQUARE

City ROCHESTER State NY Zip Code 14692

FEC Identification Number

C [REDACTED]

Purpose of Disbursement
BANK SERVICE CHARGE

001
Category/
Type

Transaction ID : SB21B.5910

Amount of Each Disbursement this Period

[REDACTED] 79.12

Candidate Name

Memo Item

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

Full Name (Last, First, Middle Initial)

B. JP MORGAN CHASE BANK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	2	1

Mailing Address CHASE SQUARE

City ROCHESTER State NY Zip Code 14692

FEC Identification Number

C [REDACTED]

Purpose of Disbursement
BANK SERVICE CHARGE

001
Category/
Type

Transaction ID : SB21B.5911

Amount of Each Disbursement this Period

[REDACTED] 73.09

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

Memo Item

Full Name (Last, First, Middle Initial)

C. JP MORGAN CHASE BANK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	2	1

Mailing Address CHASE SQUARE

City ROCHESTER State NY Zip Code 14692

FEC Identification Number

C [REDACTED]

Purpose of Disbursement
BANK SERVICE CHARGE

001
Category/
Type

Transaction ID : SB21B.5913

Amount of Each Disbursement this Period

[REDACTED] 73.04

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

Memo Item

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

[REDACTED] 225.25

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

[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial) A. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 10 / 15 / 2021
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5914 Amount of Each Disbursement this Period 84.75
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK SERVICE CHARGE		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 11 / 15 / 2021
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5915 Amount of Each Disbursement this Period 78.98
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK SERVICE CHARGE		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 12 / 15 / 2021
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5919 Amount of Each Disbursement this Period 84.82
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK SERVICE CHARGE		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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)..... ▶

248.55

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

[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. NIXON PEABODY LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1300 CLINTON SQUARE

City ROCHESTER State NY Zip Code 14604

Purpose of Disbursement PROFESSIONAL FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5917

Amount of Each Disbursement this Period: 692.50

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	692.50
TOTAL This Period (last page this line number only).....▶	1166.30

**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)
Nixon Peabody LLP PAC

A. BLUMENAUER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 901 SE OAK STREET
SUITE 105

M M M	/	D D D	/	Y Y Y Y Y
11		16		2021

City PORTLAND State OR Zip Code 97214

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

C C00307314

Transaction ID : SB23.5945

Amount of Each Disbursement this Period

1900.00

Candidate Name

BLUMENAUER, EARL, , ,

Office Sought: House Senate President
 Disbursement For: 2022 Primary General Other (specify) ▼
 State: OR District: 03

Memo Item

B. BRUCE POLIQUIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 524

M M M	/	D D D	/	Y Y Y Y Y
12		02		2021

City BANGOR State ME Zip Code 04402

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

C

Transaction ID : SB23.5926

Amount of Each Disbursement this Period

1000.00

Candidate Name

POLIQUIN FOR CONGRESS

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

Memo Item

C. FAIR SHOT PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 15

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

City BOSTON State MA Zip Code 02137

FEC Identification Number

Purpose of Disbursement

Category/ Type

C C00574970

Transaction ID : SB23.5928

Amount of Each Disbursement this Period

2900.00

Candidate Name

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

Memo Item

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

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

5800.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address PO BOX 298

City CONCORD State NH Zip Code 03302

Purpose of Disbursement

011

Category/
Type

Candidate Name
HASSAN, MAGGIE, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NH District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 05 / 2021

FEC Identification Number

C C00588772

Transaction ID : SB23.5923

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TORRES FOR CONGRESS

Mailing Address 77-02 19TH RD

City EAST ELMHURST State NY Zip Code 11370

Purpose of Disbursement

011

Category/
Type

Candidate Name
TORRES, RITCHIE JOHN, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NY District: 15

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 27 / 2021

FEC Identification Number

C C00699744

Transaction ID : SB23.5943

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

2000.00

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

7800.00