

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

Robins Kaplan PAC

ADDRESS (number and street) 800 LaSalle Ave.
Suite 2800
Minneapolis MN 55402
Check if different than previously reported. (ACC)

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

C C00275909 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 07 / 01 / 2023 through 09 / 30 / 2023

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

Signature of Treasurer Vaughn, Brandon, E., Date 10 / 03 / 2023

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Robins Kaplan PAC

Report Covering the Period: From: 07 / 01 / 2023 To: 09 / 30 / 2023

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: 6. (a) Cash on Hand January 1, 2023 (2756.60); (b) Cash on Hand at Beginning of Reporting Period (2756.60); (c) Total Receipts (from Line 19) (10000.00); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (12756.60); 7. Total Disbursements (from Line 31) (3000.00); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (9756.60); 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) (0.00); 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) (0.00).

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Robins Kaplan 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).....	4643.00	4643.00
(ii) Unitemized	5357.00	5357.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10000.00	10000.00
(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)	10000.00	10000.00
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)).....▶	10000.00	10000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10000.00	10000.00

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	3000.00
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)) ..	3000.00	3000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3000.00	3000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	10000.00	10000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	10000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Robins Kaplan PAC

A. Churan, Amy, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4478 Via Marina #902
 City Marina Del Rey State CA Zip Code 90292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16083
 Amount of Each Receipt this Period 263.00
 Memo Item
 Contribution

B. Collyard, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12623 22nd Street No.
 City West Lakeland Twsp State MN Zip Code 55082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16084
 Amount of Each Receipt this Period 299.00
 Memo Item
 Contribution

C. D'Alelio, Melissa, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 Lake Avenue
 City Melrose State MA Zip Code 02176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16085
 Amount of Each Receipt this Period 207.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	769.00
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 13
	<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	

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

A. Froio, Anthony A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Valley Forge Drive
 City Shrewsbury State MA Zip Code 01545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16089
 Amount of Each Receipt this Period 263.00
 Memo Item
 Contribution

B. Geibelson, Michael, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2130 Kelton Avenue
 City Los Angeles State CA Zip Code 90025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins, Kaplan, Miller & Cires Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16090
 Amount of Each Receipt this Period 235.00
 Memo Item
 Contribution

C. Gleason, Jeffrey, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4526 Casco Avenue
 City Edina State MN Zip Code 55424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16091
 Amount of Each Receipt this Period 299.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	797.00
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 13
	<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)
Robins Kaplan PAC

A. Holdreith, Jacob M., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2199 Saint Clair Avenue
 City St. Paul State MN Zip Code 55105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11Al.16092
 Amount of Each Receipt this Period 299.00
 Memo Item
 Contribution

B. Johnson, Brendan, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 W Lyncrest Trail
 City Sioux Falls State SD Zip Code 57108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11Al.16093
 Amount of Each Receipt this Period 207.00
 Memo Item
 Contribution

C. Johnson, Scott G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7997 Lea Circle
 City Bloomington State MN Zip Code 55438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11Al.16094
 Amount of Each Receipt this Period 207.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	713.00
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 13
	<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)
Robins Kaplan PAC

A. Laconte, Mark S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 Wilson Lane
 City Acton State MA Zip Code 01720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16097
 Amount of Each Receipt this Period 207.00
 Memo Item
 Contribution

B. Larus, Chris, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7018 Dakota Circle
 City Chanhassen State MN Zip Code 55317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16099
 Amount of Each Receipt this Period 299.00
 Memo Item
 Contribution

C. Lerner, Kellie, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 River Terrace Apt. 3C
 City New York State NY Zip Code 10010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 07 / 11 / 2023
Transaction ID : SA11AI.16100
 Amount of Each Receipt this Period 235.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	741.00
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 13
	<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)
Robins Kaplan PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Morton, Cyrus, , ,		Date of Receipt MM / DD / YYYY 07 / 11 / 2023 Transaction ID : SA11AI.16105
Mailing Address 6624 West Shore Drive		Amount of Each Receipt this Period 234.00
City Edina	State MN	Zip Code 55435
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Robins Kaplan Miller & Ciresi	Occupation (for Individual) Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pfeiffer, Jason W., , ,		Date of Receipt MM / DD / YYYY 07 / 11 / 2023 Transaction ID : SA11AI.16110
Mailing Address 70 Wear Lane S.		Amount of Each Receipt this Period 235.00
City Orono	State MN	Zip Code 55356
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Robins Kaplan	Occupation (for Individual) Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Schmit, Peter A., , ,		Date of Receipt MM / DD / YYYY 07 / 11 / 2023 Transaction ID : SA11AI.16116
Mailing Address 1345 Meadow Avenue		Amount of Each Receipt this Period 207.00
City Shoreview	State MN	Zip Code 55126
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP	Occupation (for Individual) Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 207.00	

SUBTOTAL of Receipts This Page (optional).....▶	676.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sieff, Philip L., , ,			Date of Receipt MM / DD / YYYY 07 / 11 / 2023 Transaction ID : SA11AI.16119
Mailing Address 4000 Sunset Blvd.			Amount of Each Receipt this Period 234.00
City St. Louis Park	State MN	Zip Code 55416	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Robins, Kaplan, Miller & Cires	Occupation (for Individual) Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sutton, Tara D., , ,			Date of Receipt MM / DD / YYYY 07 / 11 / 2023 Transaction ID : SA11AI.16123
Mailing Address 2943 Fairview Lane			Amount of Each Receipt this Period 299.00
City Orono	State MN	Zip Code 55356	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Robins Kaplan Miller & Ciresi	Occupation (for Individual) Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Vogel, Bryan, J., ,			Date of Receipt MM / DD / YYYY 07 / 11 / 2023 Transaction ID : SA11AI.16127
Mailing Address 714 Adams Street			Amount of Each Receipt this Period 207.00
City Hoboken	State NJ	Zip Code 07030	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Robins Kaplan Miller & Ciresi	Occupation (for Individual) Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 207.00		

SUBTOTAL of Receipts This Page (optional).....	740.00
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 12 OF 13
<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)
Robins Kaplan PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Webster, William A., , ,

Mailing Address 5047 Otis Avenue

City Los Angeles	State CA	Zip Code 91356
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Robins Kaplan Miller & Ciresi	Occupation (for Individual) Lawyer
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2023

Transaction ID : SA11AL16128

Amount of Each Receipt this Period
207.00

Memo Item
Contribution

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

Mailing Address

City	State	Zip Code
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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
MM / DD / YYYY

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
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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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	207.00
TOTAL This Period (last page this line number only).....	4643.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Robins Kaplan PAC

A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 430 South Capitol Street SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2023
 Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 12 / 2023

FEC Identification Number: C C00000935
Transaction ID : SB23.16077

Amount of Each Disbursement this Period: 3000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify)

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	3000.00