FEC FORM 3L

REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS AND LOBBYIST/REGISTRANT PACs

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5

Friends of Schumer

ADDRESS (number and street) 192 Lexington Avenue

Suite 1001

☐ Check if different than previously reported. (ACC)

New York (CITY) NY (STATE) 10016 – (ZIP CODE)

2. **FEC IDENTIFICATION NUMBER** C C00346312

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. STATE DISTRICT NY

For Candidates Only

5. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2) and/or Semi-annual Report
- ☐ October 15 Quarterly Report (Q3)
- ☒ January 31 Year-End Report (YE) and/or Semi-annual Report
- ☐ July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report

(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) and/or Semi-annual Report
- ☐ Oct 20 (M10)
- ☐ Jan 31 (YE) and/or Semi-annual Report

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

Election on (MM/DD/YYYY) in the State of

This report also covers the semi-annual period ☐ See Line 6(b)

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

Election on (MM/DD/YYYY) in the State of

This report also covers the semi-annual period ☐ See Line 6(b)

6. Covered Period(s)

This report covers (a) Quarterly/Monthly/Pre-/Post-Election Covered Period 10/01/2021 through 12/31/2021 and/or (b) Semi-annual Covered Period ☐ January 1 - June 30 ☒ July 1 - December 31

7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period: 28,100.00

(b) Semi-annual Covered Period: 190,150.00

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: Dimas, Constantine, , ,

Signature of Treasurer: *Dimas, Constantine, , ,* ***[Electronically Filed]*** Date: 01/31/2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only							

SCHEDULE A (FEC Form 3L)

REPORTABLE BUNDLED CONTRIBUTIONS FORWARDED BY OR CREDITED TO LOBBYISTS/REGISTRANTS AND LOBBYIST/REGISTRANT PACs

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)
Friends of Schumer

A. Full Name of Lobbyist/Registrant (Last, First, Middle Initial) or Lobbyist/Registrant PAC
American Council Of Life Insurers PAC

Mailing Address 101 Constitution Ave NW
Ste 700

City: Washington | State: DC | Zip Code: 20001-2133

FEC ID number of Lobbyist/Registrant PAC, if applicable. C C00147066

Name of Employer

Reportable Bundled Contributions during:

Quarterly / Monthly / Pre-Election or Post-Election Covered Period: 0.00

Semi-annual Covered Period: 46200.00

Transaction ID : 3LAVTF54AAE871

B. Full Name of Lobbyist/Registrant (Last, First, Middle Initial) or Lobbyist/Registrant PAC
American Health Care Association Political Action Committee

Mailing Address PO Box 75357

City: Washington | State: DC | Zip Code: 20013-0357

FEC ID number of Lobbyist/Registrant PAC, if applicable. C C00006080

Name of Employer

Reportable Bundled Contributions during:

Quarterly / Monthly / Pre-Election or Post-Election Covered Period: 0.00

Semi-annual Covered Period: 37200.00

Transaction ID : 3LAVTF54AADGS3

C. Full Name of Lobbyist/Registrant (Last, First, Middle Initial) or Lobbyist/Registrant PAC
Eyles, Matt, , ,

Mailing Address 601 Pennsylvania Ave NW
Ste 500

City: Washington | State: DC | Zip Code: 20004-2601

FEC ID number of Lobbyist/Registrant PAC, if applicable. C

Name of Employer
American Health Insurance Plans

Reportable Bundled Contributions during:

Quarterly / Monthly / Pre-Election or Post-Election Covered Period: 0.00

Semi-annual Covered Period: 66000.00

Transaction ID : 3LAVTF5415X84V5

D. Full Name of Lobbyist/Registrant (Last, First, Middle Initial) or Lobbyist/Registrant PAC
Peck, Eben, , ,

Mailing Address 1812 Whiteoaks Dr

City: Alexandria | State: VA | Zip Code: 22306-2427

FEC ID number of Lobbyist/Registrant PAC, if applicable. C

Name of Employer
American Society Of Travel Advisors

Reportable Bundled Contributions during:

Quarterly / Monthly / Pre-Election or Post-Election Covered Period: 28100.00

Semi-annual Covered Period: 40750.00

Transaction ID : 3LAVTF5415WVJ42

	Quarterly/Monthly/Pre-/Post-Election Covered Period	Semi-annual Covered Period
SUBTOTAL reported on this page (optional)	28100.00	190150.00
TOTAL reported (last page only)	28100.00	190150.00