

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**
ULTRA MAGA PAC

ADDRESS (number and street) **PO Box 26141**
 Check if different than previously reported. (ACC) **Alexandria VA 22313-6141**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00763227 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2022 through / / 2022

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

Signature of Treasurer MARSTON, CHRIS, , , [Electronically Filed] Date / / 2022

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

ULTRA MAGA 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="2022"/> | <input type="text" value="44136.23"/> | <input type="text" value="44136.23"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="6840.50"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="5164.91"/> | <input type="text" value="31966.71"/> |
| (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="12005.41"/> | <input type="text" value="76102.94"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="9701.18"/> | <input type="text" value="73798.71"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="2304.23"/> | <input type="text" value="2304.23"/> |
| 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

ULTRA MAGA 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)..... | 1500.00 | 4400.00 |
| (ii) Unitemized | 3664.91 | 27537.46 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 5164.91 | 31937.46 |
| (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) | 5164.91 | 31937.46 |
| 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 | 29.25 |
| 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)).....▶ | 5164.91 | 31966.71 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 5164.91 | 31966.71 |

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 | 9496.18 | 47203.71 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 9496.18 | 47203.71 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 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 | 205.00 | 1095.00 |
| (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))..... | 205.00 | 1095.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 25500.00 |
| 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)) .. | 9701.18 | 73798.71 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 9701.18 | 73798.71 |

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) | 5164.91 | 31937.46 |
| 34. Total Contribution Refunds (from Line 28(d)) | 205.00 | 1095.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4959.91 | 30842.46 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 9496.18 | 47203.71 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 29.25 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 9496.18 | 47174.46 |

**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 16 |
| | (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)
ULTRA MAGA PAC

A. DICKINSON, JEAN, M, MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 609 5TH AVE W

| | | |
|----------------------|-------------|------------------------|
| City ROCK SPRINGS | State WY | Zip Code 82901-7621 |
|----------------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) SELF | Occupation (for Individual) FOOD PROCESSOR/RANCHER |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 06 | / | 2022 |

Transaction ID : SA11A.20895

Amount of Each Receipt this Period
200.00

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 ▼
13446.78

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 30 | / | 2022 |

Transaction ID : SA11C.20901

Amount of Each Receipt this Period
1325.41

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. AGNEW, SAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 242 GRANVILLE CT.

| | | |
|---------------------|-------------|------------------------|
| City BATON ROUGE | State LA | Zip Code 70810-4859 |
|---------------------|-------------|------------------------|

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 ▼
600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 20 | / | 2022 |

Transaction ID : SA11A.20929

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 300.00 |
| 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 16 |
| | <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)
ULTRA MAGA PAC

A. GARIBALDI, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 755 E. CAPITOL AVE.

| | | |
|------------------|-------------|------------------------|
| City MILPITAS | State CA | Zip Code 95035-6853 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) RPM COMPANY | Occupation (for Individual) CONSTRUCTION. |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 04 / 13 / 2022 |

Transaction ID : SA11A.20911

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address 2036 N. SEYMOUR RD

| | | |
|------------------|-------------|------------------------|
| City FLUSHING | State MI | Zip Code 48433-9733 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) MCLAREN RMC | Occupation (for Individual) PHYSICIAN |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 04 / 09 / 2022 |

Transaction ID : SA11A.20909

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. YU, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2645 N BERKELEY LAKE RD NW

| | | |
|----------------|-------------|------------------------|
| City DULUTH | State GA | Zip Code 30096-3002 |
|----------------|-------------|------------------------|

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

| | |
|--|------------------------------------|
| Name of Employer (for Individual) SELF EMPLOYED | Occupation (for Individual) CPA |
|--|------------------------------------|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 04 / 26 / 2022 |

Transaction ID : SA11A.20949

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 350.00 |
| 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 16 |
| <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)
ULTRA MAGA 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 |
|-------------------|-------------|------------------------|

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 ▼
13446.78

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 31 | | 2022 |

Transaction ID : SA11C.20902

Amount of Each Receipt this Period
1329.20

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. AGNEW, SAM, , ,

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

Mailing Address 242 GRANVILLE CT.

| | | |
|---------------------|-------------|------------------------|
| City BATON ROUGE | State LA | Zip Code 70810-4859 |
|---------------------|-------------|------------------------|

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 ▼
600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 20 | | 2022 |

Transaction ID : SA11A.20976

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. GARIBALDI, MIKE, , ,

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

Mailing Address 755 E. CAPITOL AVE.

| | | |
|------------------|-------------|------------------------|
| City MILPITAS | State CA | Zip Code 95035-6853 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) RPM COMPANY | Occupation (for Individual) CONSTRUCTION. |
|--|--|

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 |
| 05 | | 13 | | 2022 |

Transaction ID : SA11A.20966

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 150.00 |
| 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 9 OF 16 |
| | (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)
ULTRA MAGA PAC

A. LLOYD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2036 N. SEYMOUR RD
 City FLUSHING State MI Zip Code 48433-9733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCLAREN RMC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 09 / 2022
Transaction ID : SA11A.20964
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. YU, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2645 N BERKELEY LAKE RD NW
 City DULUTH State GA Zip Code 30096-3002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2022
Transaction ID : SA11A.20994
 Amount of Each Receipt this Period 50.00
 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
 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 ▼ 13446.78

Date of Receipt 06 / 30 / 2022
Transaction ID : SA11C.20903
 Amount of Each Receipt this Period 1355.30
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 16 |
| <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)
ULTRA MAGA PAC

A. AGNEW, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 GRANVILLE CT.
 City BATON ROUGE State LA Zip Code 70810-4859
 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 ▼ 600.00

Date of Receipt 06 / 20 / 2022
Transaction ID : SA11A.21036
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. GARIBALDI, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 755 E. CAPITOL AVE.
 City MILPITAS State CA Zip Code 95035-6853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPM COMPANY Occupation (for Individual) CONSTRUCTION.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2022
Transaction ID : SA11A.21021
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. LLOYD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2036 N. SEYMOUR RD
 City FLUSHING State MI Zip Code 48433-9733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCLAREN RMC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 09 / 2022
Transaction ID : SA11A.21000
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 400.00 |
| TOTAL This Period (last page this line number only)..... | 1500.00 |

**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)
ULTRA MAGA PAC

A. CANFIELD, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6723 WHITTIER AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement LEGAL SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 29 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I375

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD STE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement DATABASE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I374

Amount of Each Disbursement this Period: 1250.00

Memo Item

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD STE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement DATABASE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I376

Amount of Each Disbursement this Period: 1250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4500.00

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 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)
ULTRA MAGA PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
STE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I377

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. DONORBUREAU

Mailing Address 1900 N CULPEPER ST

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I381

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTION CFO

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I373

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
ULTRA MAGA PAC

Full Name (Last, First, Middle Initial)

A. EPIC PAY

Mailing Address 9300 WADE BLVD
SUITE 200

City FRISCO State TX Zip Code 75035

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 04 / 2022

FEC Identification Number

C

Transaction ID : SB21B.I378

Amount of Each Disbursement this Period

45.32

Memo Item

Full Name (Last, First, Middle Initial)

B. EPIC PAY

Mailing Address 9300 WADE BLVD
SUITE 200

City FRISCO State TX Zip Code 75035

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.I382

Amount of Each Disbursement this Period

19.17

Memo Item

Full Name (Last, First, Middle Initial)

C. EPIC PAY

Mailing Address 9300 WADE BLVD
SUITE 200

City FRISCO State TX Zip Code 75035

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 01 / 2022

FEC Identification Number

C

Transaction ID : SB21B.I384

Amount of Each Disbursement this Period

17.54

Memo Item

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

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

82.03

**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)
ULTRA MAGA PAC

Full Name (Last, First, Middle Initial)

A. FORMOST GRAPHIC COMMUNICATIONS

Mailing Address 19209-A CHENNAULT WAY

City GAITHERSBURG State MD Zip Code 20879

Purpose of Disbursement
DIRECT MAIL SERVICES

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
04 / 13 / 2022

FEC Identification Number

C
Transaction ID : SB21B.I380
Amount of Each Disbursement this Period
299.67

Memo Item

Full Name (Last, First, Middle Initial)

B. FORMOST GRAPHIC COMMUNICATIONS

Mailing Address 19209-A CHENNAULT WAY

City GAITHERSBURG State MD Zip Code 20879

Purpose of Disbursement
DIRECT MAIL SERVICES

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
06 / 16 / 2022

FEC Identification Number

C
Transaction ID : SB21B.I386
Amount of Each Disbursement this Period
411.45

Memo Item

Full Name (Last, First, Middle Initial)

C. LJ3 MANAGEMENT LLC

Mailing Address 2585 TWIN CREEKS DRIVE

City AKRON State OH Zip Code 44321

Purpose of Disbursement
DIGITAL CONSULTING

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
05 / 02 / 2022

FEC Identification Number

C
Transaction ID : SB21B.I372
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

1711.12

**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)
ULTRA MAGA PAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. MIDDLETOWN VALLEY BANK | | Date of Disbursement MM / DD / YYYY 04 / 04 / 2022 |
| Mailing Address 1101 PROFESSIONAL COURT | | FEC Identification Number C [] Transaction ID : SB21B.I379 Amount of Each Disbursement this Period [] 23.04 |
| City HAGERSTOWN | State MD | Zip Code 21740 |
| Purpose of Disbursement BANK SERVICE CHARGES | | 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. MIDDLETOWN VALLEY BANK | | Date of Disbursement MM / DD / YYYY 05 / 02 / 2022 |
| Mailing Address 1101 PROFESSIONAL COURT | | FEC Identification Number C [] Transaction ID : SB21B.I383 Amount of Each Disbursement this Period [] 40.06 |
| City HAGERSTOWN | State MD | Zip Code 21740 |
| Purpose of Disbursement BANK SERVICE CHARGES | | 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) C. MIDDLETOWN VALLEY BANK | | Date of Disbursement MM / DD / YYYY 06 / 01 / 2022 |
| Mailing Address 1101 PROFESSIONAL COURT | | FEC Identification Number C [] Transaction ID : SB21B.I385 Amount of Each Disbursement this Period [] 38.13 |
| City HAGERSTOWN | State MD | Zip Code 21740 |
| Purpose of Disbursement BANK SERVICE CHARGES | | 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 | |

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

101.23

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)
ULTRA MAGA PAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES | | Date of Disbursement MM / DD / YYYY 06 / 30 / 2022 |
| Mailing Address 1776 WILSON BOULEVARD | | FEC Identification Number C [] Transaction ID : SB21B.I394 |
| City ARLINGTON | State VA | Zip Code 22209 |
| Purpose of Disbursement FUNDRAISING FEES | | Amount of Each Disbursement this Period [] 318.81 |
| 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: | Category/Type | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES | | Date of Disbursement MM / DD / YYYY 06 / 30 / 2022 |
| Mailing Address 1776 WILSON BOULEVARD | | FEC Identification Number C [] Transaction ID : SB21B.I395 |
| City ARLINGTON | State VA | Zip Code 22209 |
| Purpose of Disbursement FUNDRAISING FEES | | Amount of Each Disbursement this Period [] 15.00 |
| 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: | Category/Type | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. | | 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 | | 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: | Category/Type | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 333.81 |
| TOTAL This Period (last page this line number only).....▶ | 9496.18 |