PAGE 1 / 10

Image# 202003099203797283

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

I OKWI 3X	For	Other Than	An Authorized	I Commit	tee		Office Use	Only	
1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If type over the lines.					oing, type	12FE4M	5]	
COMMUNITY	HEALTH C	OUNCIL P	PAC DBA BRE	EAST CA	ANCER HE	ALTH CC	UNCIL	PAC	
ADDRESS (number an	d street)	627 K STREET TE 500	NW						
Check if different than previous	erent L	VASHINGTON				DC	20006		
reported. (A		-	CITY A			LL STATE ▲	71	P CODE A	
2. FEC IDENTIFIC C C0065268		ER V	3. IS THIS REPORT		NEW (N) OR		ENDED	P CODE A	
4. TYPE OF REF (Choose One) (a) Quarterly Rep		(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5) Jun 20 (M6)	-	20 (M8) 20 (M9)	(Non-E Year C	20 (M12) Election
April 15 Quarterly	/ Report (Q1)	(c) 12-Day	Apr 20 (M4)	Primary (12	Jul 20 (M7)	Oct 2	20 (M10)	-	31 (YE) ff (12R)
July 15 Quarterly October	Quarterly Report (Q2)		lection for the:	Convention (12C)		Special (12S)			
Quarterly January	Report (Q3)		Election on	M = M	/ D D /	Y Y Y Y Y Y Y Y Y Y		n the State of	
July 31 Report (Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY)		Election for the:	General (3	0G)	Runoff (3	0R)	Spec	ial (30S)
Terminat (TER)	ion Report		Election on	M = M	/ D = D /	Y I Y I Y I Y		n the State of	
5. Covering Period	M M M O1	01	2020	through	03	/ D D /	2020	• Υ	
I certify that I have ex Type or Print Name of	E	eport and to the sass, Zachary, ,		wledge and	belief it is tru	e, correct and	complete.		
Signature of Treasure	Bass, Zach	nary, , ,		[Electronica	lly Filed] □	ate 03	/ 09	/ Y Y Y 202	20
NOTE: Submission of f	alse, erroneous	, or incomplete	information may su	ubject the pe	erson signing th	is Report to th	e penalties	of 52 U.S.C	C. § 30109
Office Use								FORM 3	X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

COMMUNITY HEALTH COUNCIL PAC DBA BREAST CANCER HEALTH COUNCIL PAC

01 01 2020 03 01 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 8422.21 January 1. 2020 (b) Cash on Hand at 8422.21 Beginning of Reporting Period..... 132424.85 132424.85 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 140847.06 140847.06 6(a) and 6(c) for Column B)..... 120657.37 120657.37 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 20189.69 20189.69 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

COMMUNITY HEALTH COUNCIL PAC DBA BREAST CANCER HEALTH COUNCIL PAC

R	eport Covering the Period: From:		03 01 2020		
	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)	300.00	300.00		
	(ii) Unitemized(iii) TOTAL (add	132124.85	132124.85		
	Lines 11(a)(i) and (ii)▶	132424.85	132424.85		
	(b) Political Party Committees	0.00	0.00		
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00		
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	132424.85	132424.85		
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00		
13.	All Loans Received	0.00	0.00		
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00		
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00		
16.	Refunds of Contributions Made to Federal Candidates and Other				
17.	Political Committees Other Federal Receipts	0.00	0.00		
18.	(Dividends, Interest, etc.)	0.00	0.00		
	(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))▶	132424.85	132424.85		
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	132424.85	132424.85		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Carstina. 1941 to Sate		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	4 4 4			
Expenditures	120657.37	120657.37		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	120657.37	120657.37		
Transfers to Affiliated/Other Party	0.00	0.00		
Committees Contributions to Federal Candidates/Committees	0.00	0.00		
and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	0.00	0.00		
Coordinated Party Expenditures (52 U.S.C. § 30116(d))				
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	200	0.00		
man Folitical 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		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity (from Schedule H6)	20))			
(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	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	120657.37	120657.37		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	100057.07			
HOTH LINE 31)	120657.37	120657.37		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 132424.85 132424.85 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 132424.85 132424.85 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 120657.37 120657.37 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 120657.37 120657.37 (subtract Line 37 from Line 36)

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC '5 F9 DCF Hz G7 < 98 I @ 'CF' + H9 A = N5 H+CB

Form/Schedule: F3XT Transaction ID:

Community Health Council has terminated its ongoing operations and will no longer be engaged in political activity. It will retain the remaining cash on hand as a contingent reserve against any potential administrative requirements. Upon resolving any contingent liabilities, all remaining funds will be donated to a 501(c)(3) organization. For reporting purposes we have used the term "Donor Outreach" on our Schedule B supporting line 21(b). We have contracted multiple companies to provide "Donor Outreach" services for us. "DonorOutreach" services include but are not limited to FUNDRAISING ACTIVITIES, DONOR DATABASE MANAGEMENT, CAGING AND ESROW, DIRECT MAIL SERVICES, Letterhead/Envelopes/Stationary and List Acquisition.

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

	FOR LINE NUMBER:				PAGE	7	OF	10		
(check only one)										
		X	11a		11b		11c	12	2	
			13		14		15	16	6	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) COMMUNITY HEALTH COUNCIL PAC DBA BREAST CANCER HEALTH COUNCIL PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FRANKLIN, MARK, , , Date of Receipt Mailing Address 1017 SHADOWLAWN DR 2020 07 City Zip Code State Transaction ID: SA11AI.5566 OH **TOLEDO** 43609 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... 300.00 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)		EOD LINE NUMBE	PAGE 8 OF 10			
ITEMIZED DISBURSEMENTS	Use separate schedule(NOMBELL.			
TI LIVIIZED DISBONSLIVILINIS	for each category of the Detailed Summary Page	1 V 21h 72	2 23 26 27			
	Detailed Summary Page	28a 28	3b 28c 29 30b			
Any information copied from such Reports and Stat	ements may not be sold or	used by any person for t	he purpose of soliciting contributions			
or for commercial purposes, other than using the na	ame and address of any pol	tical committee to solicit	contributions from such committee.			
NAME OF COMMITTEE (In Full)						
$ \; angle$ COMMUNITY HEALTH COUNCI	L PAC DBA BREAS	T CANCER HEA	LTH COUNCIL PAC			
Full Name (Last, First, Middle Initial)						
A. ACTION COMMITTEE MARKETI	NG LLC	Date	Date of Disbursement			
		M	M / D D / Y Y Y			
Mailing Address 698 Oldfield Commons Dr.		C	01 31 2020			
Cit.	Ctata Zin Cada					
City Greenwood	State Zip Code IN 46142	FEC	Identification Number			
Purpose of Disbursement		C				
Donor Outreach			Transaction ID : SB21B.5553 Amount of Each Disbursement this Period			
Candidate Name		Category/ Amo				
Office Sought: House Disburs		Туре	62351.21			
Office Sought: House Disburs Senate	ement For: Primary		02331.21			
President	Other (specify)		Maria Maria			
State: District:			Memo Item			
Full Name (Last, First, Middle Initial)						
B. ACTION COMMITTEE MARKET!	ING, LLC	Date	Date of Disbursement			
Matter Address and State	M	M / D D / Y Y Y Y				
Mailing Address 698 Oldfield Commons Dr.		28 2020				
City	State Zip Code	FFO	I I de catification Alimahan			
Greenwood	IN 46142	FEC	Identification Number			
Purpose of Disbursement Donor Outreach		C				
Candidate Name			Transaction ID : SB21B.5558			
Candidate Name		Category/ Amo	ount of Each Disbursement this Period			
Office Sought: House Disburs	ement For:	1,750	16741.49			
Senate	Primary General		7 7			
President	Other (specify)		Memo Item			
State: District:						
Full Name (Last, First, Middle Initial)	- 110	Date	e of Disbursement			
C. AMERICAN PUBLIC RESOURCE	=, LLC					
Mailing Address 3855 South 500 West, Suite D			1 31 2020			
City	State Zip Code	FEC	Identification Number			
South Salt Lake Purpose of Disbursement	UT 84115	C				
Donor Outreach			Transaction ID : SB21B.5554			
Candidate Name			ount of Each Disbursement this Period			
		Type				
	ement For:		5043.55			
Senate President	Primary General Other (specify) ▼					
State: District:	Strict (openity) \		Memo Item			
SUBTOTAL of Disbursements This Page (optional))		84136.25			
TOTAL This Period (last page this line number on	ly)					

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SCHEDULE B (FEC Form 3X)	Llon non	arata ashedula(s)	FOR LINE		PAGE 9 OF 10		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only	v one) 22 23 7	☐ 26 ☐ 27		
		Summary Page	28a	28b 28c	29 27 30b		
Any information copied from such Reports and State							
or for commercial purposes, other than using the na	me and addr	ess of any politica	I committee to	solicit contributions from	om such committee.		
NAME OF COMMITTEE (IN Full) COMMUNITY HEALTH COUNCIL	. PAC DE	BA BREAST	CANCER	HEALTH COU	NCIL PAC		
Full Name (Last, First, Middle Initial) A. AMERICAN PUBLIC RESOURCE	, LLC			Date of Disbursement			
Mailing Address 3855 South 500 West, Suite D				02 28	2020		
City South Salt Lake	State UT	Zip Code 84115		FEC Identification N	lumber		
Purpose of Disbursement Donor Outreach				C			
Candidate Name			Category/ Type	Transaction ID : SB21B.5559 Amount of Each Disbursement this Period			
Senate	ement For: Primary	General			1155.85		
State: District:	Other (spec	cify) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
B. GSI, INC		Date of Disburseme	ent				
Mailing Address 6655 Chicago Road, Suite A							
City Warren	State MI	Zip Code 48092		FEC Identification N	lumber		
Purpose of Disbursement Donor Outreach	Purpose of Disbursement						
Candidate Name	Category/ Type			Transaction ID Amount of Each Dis	: SB21B.5556 sbursement this Period		
Office Sought: House Disburse Senate	ement For: Primary	General		4	6226.79		
State: District:	Other (spec	cify)		Memo Item			
Full Name (Last, First, Middle Initial) C. GSI, INC				Date of Disburseme	_		
Mailing Address 6655 Chicago Road, Suite A				02 28	2020		
City Warren Purpose of Disbursement Donor Outreach	State MI	Zip Code 48092		FEC Identification Number			
Candidate Name	Categor Type			Transaction ID Amount of Each Dis	: SB21B.5560 sbursement this Period		
Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General Cify) ▼	Турс	Memo Item	2747.14		
State: District:				Ц			
SUBTOTAL of Disbursements This Page (optional).			······•		10129.78		
TOTAL This Period (last page this line number only	<i>ı</i>)			L			

S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 OF 10				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only	· ·			
		Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b			
Any information conicd from such Deports and State	monto mov	not be cold or us					
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
COMMUNITY HEALTH COUNCIL	PAC D	BA BREAST	CANCER	HEALTH COUNCIL PAC			
<u> </u>							
Full Name (Last, First, Middle Initial) A. MARKET PROCESS GROUP				Date of Disbursement			
WARRETT ROCESS GROOT				M M / D D / Y Y Y Y			
Mailing Address 1250 Connecticut Ave, NW, Suite	20			01 31 2020			
Cit.	Ctata	Zin Codo					
City Washington	State DC	Zip Code 20036		FEC Identification Number			
Purpose of Disbursement				C			
Donor Outreach			L	Transaction ID : SB21B.5557			
Candidate Name			Category/	Amount of Each Disbursement this Period 15237.55			
Office Sought: House Disburse	ement For:		Туре				
Senate	Primary	General					
President	Other (spe	cify) ▼		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial) B. MARKET PROCESS GROUP				Date of Disbursement			
B. MARKET PROCESS GROUP		02 28 2020					
Mailing Address 1250 Connecticut Ave, NW, Suite							
City Washington	State DC	Zip Code 20036		FEC Identification Number			
Purpose of Disbursement	se of Disbursement			C			
Donor Outreach				Transaction ID : SB21B.5561			
Candidate Name		Category/	Amount of Each Disbursement this Period				
Office Sought: House Disburse	Type			9380.79			
Senate	Primary	General		4 4			
President	Other (specify)			Memo Item			
State: District:				L mone nem			
Full Name (Last, First, Middle Initial) C. TAMPA MEDIA MARKETING INC.				Date of Disbursement			
C. TAMPA MEDIA MARKETING INC	•			M M / D D / Y Y Y Y			
Mailing Address 7320 E Fletcher Ave				02 27 2020			
-	la	T=: 0 .					
City Tampa	State FL	Zip Code 33637		FEC Identification Number			
Purpose of Disbursement		00007		C			
Media Consulting				Transaction ID : SB21B.5563			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ement For:		Туре	1685.00			
Senate	Primary	General		7 7 7			
President	Other (spe	cify) ▼		Memo Item			
State: District:	_						
				26303.34			
SUBTOTAL of Disbursements This Page (optional).			·····•	2000.04			
TOTAL This Period (last page this line number only	/)			120569.37			