

# 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

**DMFI PAC**

ADDRESS (number and street) 1023 31st Street, NW

Check if different than previously reported. (ACC) Suite 530

Washington DC 20007

2. **FEC IDENTIFICATION NUMBER ▼** C C00710848 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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 08 / 03 / 2021 in the State of OH

(d) 30-Day **POST-Election** Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on   /   /   in the State of  

5. Covering Period 01 / 26 / 2021 through 07 / 14 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Mellman, Mark, , ,

Type or Print Name of Treasurer

Signature of Treasurer Mellman, Mark, , , *[Electronically Filed]* Date 07 / 21 / 2021

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

**DMFI 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="119919.74"/>	<input type="text" value="119919.74"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="101694.24"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1565147.88"/>	<input type="text" value="1594912.91"/>
(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="1666842.12"/>	<input type="text" value="1714832.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1094806.64"/>	<input type="text" value="1142797.17"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="572035.48"/>	<input type="text" value="572035.48"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="41141.20"/>	

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

**DMFI 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).....	99215.00	106965.00
(ii) Unitemized .....	13687.18	14059.38
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	112902.18	121024.38
(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) .....	112902.18	121024.38
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).....	5107.20	5107.20
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1447138.50	1468781.33
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)).....▶	1565147.88	1594912.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1565147.88	1594912.91

**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 .....	35902.15	49011.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35902.15	49011.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	3500.00
24. Independent Expenditures (use Schedule E) .....	714297.41	714297.41
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).....	341107.08	375988.52
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)) ..	1094806.64	1142797.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1094806.64	1142797.17

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	112902.18	121024.38
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	112902.18	121024.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	35902.15	49011.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	5107.20	5107.20
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30794.95	43904.04

**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 110
	<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	

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)  
**DMFI PAC**

**A. Adelson, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 N Moore St  
 City New York State NY Zip Code 10013-2460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2021  
**Transaction ID : VVC9XRF2B60**  
 Amount of Each Receipt this Period  
 3600.00  
 Memo Item

**B. Aronson, Jeffrey, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Central Park W Apt 9E  
 City New York State NY Zip Code 10023-4250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Centerbridge Partners Occupation (for Individual) Managing Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2021  
**Transaction ID : VVC9XRJ3QN9**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Boskovitz, Abraham, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 La Salle Ave  
 City Piedmont State CA Zip Code 94610-1233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2021  
**Transaction ID : VVC9XRJQX19**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8850.00
<b>TOTAL</b> 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 110
	<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)  
**DMFI PAC**

**A. Candau, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Monte Crest Ct  
 City Walnut Creek State CA Zip Code 94595-2659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marble Bridge Funding Group Occupation (for Individual) HR Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2021  
**Transaction ID : VVC9XRKW7G4**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Candau, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Monte Crest Ct  
 City Walnut Creek State CA Zip Code 94595-2659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marble Bridge Funding Group Occupation (for Individual) HR Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 09 / 2021  
**Transaction ID : VVC9XRP9D99**  
 Amount of Each Receipt this Period 4500.00  
 Memo Item

**C. Chanals, Sheldon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 384 Rutland Ave  
 City Teaneck State NJ Zip Code 07666-2842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Herrick Feinstein LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 19 / 2021  
**Transaction ID : VVC9XREM9Y6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5250.00
<b>TOTAL</b> 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 110
<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)  
**DMFI PAC**

**A. Chanales, Sheldon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 384 Rutland Ave  
 City Teaneck State NJ Zip Code 07666-2842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Herrick Feinstein LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2021  
**Transaction ID : VVC9XR7DH9**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Chanales, Sheldon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 384 Rutland Ave  
 City Teaneck State NJ Zip Code 07666-2842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Herrick Feinstein LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 19 / 2021  
**Transaction ID : VVC9XRHS8S0**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Chanales, Sheldon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 384 Rutland Ave  
 City Teaneck State NJ Zip Code 07666-2842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Herrick Feinstein LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2021  
**Transaction ID : VVC9XRJQSB9**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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 110
	<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)  
**DMFI PAC**

**A. Chanales, Sheldon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 384 Rutland Ave  
 City Teaneck State NJ Zip Code 07666-2842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Herrick Feinstein LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **05 / 27 / 2021**  
**Transaction ID : VVC9XRJQT05**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Chanales, Sheldon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 384 Rutland Ave  
 City Teaneck State NJ Zip Code 07666-2842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Herrick Feinstein LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **06 / 19 / 2021**  
**Transaction ID : VVC9XRKRZE8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Cohen, Harvey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4590 Merganser Ct  
 City Naples State FL Zip Code 34119-7970  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AOPA Occupation (for Individual) Fundraiser  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt **02 / 11 / 2021**  
**Transaction ID : VVC9XREDV85**  
 Amount of Each Receipt this Period 1800.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2550.00
<b>TOTAL</b> 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 110
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Cooper, Milton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Red Ground Rd  
 City Old Westbury State NY Zip Code 11568-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kimco Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2021  
**Transaction ID : VVC9XRF2BK3**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Ganz, Elissa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 Park Ave S Apt 4B  
 City New York State NY Zip Code 10016-8017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2021  
**Transaction ID : VVC9XRJQT46**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Goldman, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6005 Stuart Ave  
 City Baltimore State MD Zip Code 21209-4019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatrist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2021  
**Transaction ID : VVC9XRJA760**  
 Amount of Each Receipt this Period  
 180.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5430.00
<b>TOTAL</b> 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 110
	<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)  
**DMFI PAC**

**A. Goldman, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6005 Stuart Ave  
 City Baltimore State MD Zip Code 21209-4019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatrist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **540.00**

Date of Receipt **06 / 09 / 2021**  
**Transaction ID : VVC9XRKJH83**  
 Amount of Each Receipt this Period **180.00**  
 Memo Item

**B. Goldman, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6005 Stuart Ave  
 City Baltimore State MD Zip Code 21209-4019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatrist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **540.00**

Date of Receipt **07 / 09 / 2021**  
**Transaction ID : VVC9XRP9GB1**  
 Amount of Each Receipt this Period **180.00**  
 Memo Item

**C. Gordon, Lance, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4715 Caritina Dr  
 City Tarzana State CA Zip Code 91356-5010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **225.00**

Date of Receipt **05 / 16 / 2021**  
**Transaction ID : VVC9XRJQSF0**  
 Amount of Each Receipt this Period **100.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>460.00</b>
<b>TOTAL</b> 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 110
	<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)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gordon, Lance, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 25 / 2021
Mailing Address 4715 Caritina Dr		<b>Transaction ID : VVC9XRJQSE3</b>
City Tarzana	State CA	Zip Code 91356-5010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Self-Employed	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 ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Gordon, Lance, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 29 / 2021
Mailing Address 4715 Caritina Dr		<b>Transaction ID : VVC9XRJQSD5</b>
City Tarzana	State CA	Zip Code 91356-5010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Self-Employed	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 ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Gottesman, Robin, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 27 / 2021
Mailing Address 37 Sunflower Dr		<b>Transaction ID : VVC9XRJQYK4</b>
City Upper Saddle River	State NJ	Zip Code 07458-2041
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Photographer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	625.00
<b>TOTAL</b> 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 110
	<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)  
**DMFI PAC**

**A. Greenberg, Lawrence, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Nottingham Ln  
 City Weston State MA Zip Code 02493-1344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 09 / 2021  
**Transaction ID : VVC9XRK7Z37**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Gunn, Anton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 290820  
 City Columbia State SC Zip Code 29229-0014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 05 / 2021  
**Transaction ID : VVC9XRJA7B0**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Isenberg, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4400 W 87th Ter  
 City Prairie Village State KS Zip Code 66207-1918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 18 / 2021  
**Transaction ID : VVC9XRHKJ21**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7250.00
<b>TOTAL</b> 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 110
<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)  
**DMFI PAC**

**A. Isenberg, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4400 W 87th Ter  
 City Prairie Village State KS Zip Code 66207-1918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 18 / 2021**  
**Transaction ID : VVC9XRJQXR1**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

**B. Kahn, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4821 Foxhall Cres NW  
 City Washington State DC Zip Code 20007-1052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 28 / 2021**  
**Transaction ID : VVC9XRHS8P6**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Kanfer, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Gojo Plz  
 City Akron State OH Zip Code 44311-1057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Walnut Ridge Strategic Mgmt Occupation (for Individual) Venturer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 06 / 2021**  
**Transaction ID : VVC9XRH13Y8**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7250.00
<b>TOTAL</b> 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 110
	<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)  
**DMFI PAC**

**A. Kaplan, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2821 N Pine Grove Ave  
 City Chicago State IL Zip Code 60657-6109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Quarles & Brady LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VVC9XRET046**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Kaplan, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2821 N Pine Grove Ave  
 City Chicago State IL Zip Code 60657-6109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Quarles & Brady LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2021  
**Transaction ID : VVC9XRHS8H7**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Kaplan, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2821 N Pine Grove Ave  
 City Chicago State IL Zip Code 60657-6109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Quarles & Brady LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2021  
**Transaction ID : VVC9XRJQWW0**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 110
<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)  
**DMFI PAC**

**A. Kaplin, Ned, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 70 Portland Rd  
 City W Cnshohocken State PA Zip Code 19428-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Briara Trading Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2021  
**Transaction ID : VVC9XRKJGS6**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Lewis, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4550 N Park Ave Apt 709  
 City Chevy Chase State MD Zip Code 20815-7237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 29 / 2021  
**Transaction ID : VVC9XRE7B34**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Merlo, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 E 69th St  
 City New York State NY Zip Code 10021-5704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VVC9XRET0V7**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10100.00
<b>TOTAL</b> 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 17 OF 110
	<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)  
**DMFI PAC**

**A. Merlo, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 E 69th St  
 City New York State NY Zip Code 10021-5704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 30 / 2021  
**Transaction ID : VVC9XRHS8E3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Mor, Golan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1221 Hilary Ln  
 City Highland Park State IL Zip Code 60035-2379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Garden Fresh Market Occupation (for Individual) Supermarket  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2021  
**Transaction ID : VVC9XRJQYZ9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Perlman, Cary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1934 N Cleveland Ave  
 City Chicago State IL Zip Code 60614-5216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Latham & Watkins LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 02 / 2021  
**Transaction ID : VVC9XRP9G54**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> 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 18 OF 110
<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)  
**DMFI PAC**

**A. Platt, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10393 Strathmore Dr  
 City Los Angeles State CA Zip Code 90024-2538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marc Platt Productions Occupation (for Individual) Producer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 28 / 2021  
**Transaction ID : VVC9XRJQXX0**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Pomeranz, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 Paloma Ave  
 City San Francisco State CA Zip Code 94127-2610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 18 / 2021  
**Transaction ID : VVC9XREMAG8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Pomeranz, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 Paloma Ave  
 City San Francisco State CA Zip Code 94127-2610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 13 / 2021  
**Transaction ID : VVC9XRJQWQ0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> 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 19 OF 110
	<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)  
**DMFI PAC**

**A. Porter, Barry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11601 Wilshire Blvd  
 Ste 1600  
 City Los Angeles State CA Zip Code 90025-0317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Clarity Management Occupation (for Individual) Investments  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2021  
**Transaction ID : VVC9XRKQGN6**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Richman, Todd, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 73 I U Willets Rd  
 City Old Westbury State NY Zip Code 11568-1533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JP Morgan Securities Occupation (for Individual) Financial Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2021  
**Transaction ID : VVC9XRHS8Z7**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. Rodan, Amnon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6114 La Salle Ave  
 # 442  
 City Oakland State CA Zip Code 94611-2802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rodan & Fields Occupation (for Individual) Business Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2021  
**Transaction ID : VVC9XREJCJ0**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> 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 20 OF 110
	<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)  
**DMFI PAC**

**A. Rosenberg, Stacy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6207 Camino De La Costa  
 City La Jolla State CA Zip Code 92037-6523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 09 / 2021**  
**Transaction ID : VVC9XRF2BG9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Rosman, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 Harbour Place Dr Unit 1715  
 City Tampa State FL Zip Code 33602-6805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **02 / 17 / 2021**  
**Transaction ID : VVC9XREMAS7**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Rosman, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 Harbour Place Dr Unit 1715  
 City Tampa State FL Zip Code 33602-6805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **02 / 17 / 2021**  
**Transaction ID : VVC9XREMAT5**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6100.00
<b>TOTAL</b> 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 21 OF 110
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Rosman, Judith, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 27 / 2021
Mailing Address 301 Harbour Place Dr Unit 1715		<b>Transaction ID : VVC9XRESZT9</b>
City Tampa	State FL	Zip Code 33602-6805
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Scheinman, Jim, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2021
Mailing Address 26400 Aric Ln		<b>Transaction ID : VVC9XRP9H07</b>
City Los Altos Hills	State CA	Zip Code 94022-1918
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual) Maven	Occupation (for Individual) Managing Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Schusterman, Stacy, H, ,</b>		Date of Receipt MM / DD / YYYY 04 / 08 / 2021
Mailing Address 110 W 7th St		<b>Transaction ID : VVC9XRGK1C2</b>
City Tulsa	State OK	Zip Code 74119-1031
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Samson Energy Company, LLC	Occupation (for Individual) Chair	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> 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 22 OF 110
	<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)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Shay, Scott, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2021
Mailing Address 75 E End Ave Apt 8E		<b>Transaction ID : VVC9XR7DK5</b>
City New York	State NY	Zip Code 10028-7914
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Signature Bank	Occupation (for Individual) Banker	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Villegas, Peter, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 21 / 2021
Mailing Address 11036 De Anza Dr		<b>Transaction ID : VVC9XRHS8M0</b>
City Rancho Cucamonga	State CA	Zip Code 91730-6893
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Mercury	Occupation (for Individual) Co-Chairman	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Viterbi, Alan, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 07 / 2021
Mailing Address 1020 Prospect St Unit 303		<b>Transaction ID : VVC9XRH1327</b>
City La Jolla	State CA	Zip Code 92037-4162
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Liquid Environmental Solutions	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> 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 23 OF 110
	<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)  
**DMFI PAC**

**A. Viterbi, Andrew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2712 Glenwick Pl  
 City La Jolla State CA Zip Code 92037-2040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Viterbi Group, LLC Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 08 / 2021**  
**Transaction ID : VVC9XRGK1E8**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Wallick, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 489 Marlborough Rd  
 City Brooklyn State NY Zip Code 11226-6515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wallick Communities Occupation (for Individual) Real Estate Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 18 / 2021**  
**Transaction ID : VVC9XREMA92**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Wallick, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1703 Putter Ln  
 City Reston State VA Zip Code 20190-4830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wallick Communities Occupation (for Individual) Real Estate Developer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 18 / 2021**  
**Transaction ID : VVC9XREMA85**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6250.00
<b>TOTAL</b> 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 24 OF 110
	<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)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Weinberg, Debra, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 29 / 2021
Mailing Address 210 Lavaca St Apt 2810		<b>Transaction ID : VVC9XRJQYE5</b>
City Austin	State TX	Zip Code 78701-4596
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Welinsky, Howard, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 27 / 2021
Mailing Address 10525 Bloomfield St		<b>Transaction ID : VVC9XRET012</b>
City Toluca Lake	State CA	Zip Code 91602-2812
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Younai, Laura, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 13 / 2021
Mailing Address 4188 Vicasa Dr		<b>Transaction ID : VVC9XRP9GY1</b>
City Calabasas	State CA	Zip Code 91302-1873
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) ProHealth Professional Svcs.	Occupation (for Individual) CFO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	99215.00



**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 25 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Amalgamated Investment Services**

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

Mailing Address 10 E 14th St

City New York	State NY	Zip Code 10003-3158
------------------	-------------	------------------------

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 ▼  
5107.20

Date of Receipt  

M M	/	D D	/	Y Y Y Y
07	/	14	/	2021

**Transaction ID : VVC9XR9HJ9**

Amount of Each Receipt this Period  
5107.20

Memo Item

Non-Contribution Account - Pfizer stock sold through broker. Purchaser unknown.

**B.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

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  

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

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
------	-------	----------

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  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5107.20
<b>TOTAL</b> This Period (last page this line number only).....	5107.20

**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 26 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Abramson, Pennie, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2021
Mailing Address 10513 Stapleford Hall Dr		<b>Transaction ID : VVC9XREM5B6</b>
City Potomac	State MD	Zip Code 20854-4446
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Aronson, Jeffrey, H, ,</b>		Date of Receipt MM / DD / YYYY 05 / 05 / 2021
Mailing Address 101 Central Park W Apt 9E		<b>Transaction ID : VVC9XRJ3QP7</b>
City New York	State NY	Zip Code 10023-4250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45000.00
Name of Employer (for Individual) Centerbridge Partners	Occupation (for Individual) Managing Principal	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 45000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Baker, Alice, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 12 / 2021
Mailing Address 3333 E Speedway Blvd		<b>Transaction ID : VVC9XRJQZ07</b>
City Tucson	State AZ	Zip Code 85716-3935
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 25000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	71000.00
<b>TOTAL</b> 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 27 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Benedict, Daniel, , ,</b>		Date of Receipt
Mailing Address 150 Great Neck Rd		<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2021"/>
City Great Neck	State NY	Zip Code 11021-3356
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRK7Z03</b>
Name of Employer (for Individual) Self-Employed		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual) Investments		<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="5000.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bloom, Bradley, , ,</b>		Date of Receipt
Mailing Address 11 Albion Rd		<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2021"/>
City Wellesley Hills	State MA	Zip Code 02481-1304
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRKQRF2</b>
Name of Employer (for Individual) Berkshire Partners LLC		Amount of Each Receipt this Period <input type="text" value="25000.00"/>
Occupation (for Individual) Investments		<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="25000.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bond, Rob, , ,</b>		Date of Receipt
Mailing Address 500 Greenleaf Ave		<input type="text" value="07"/> / <input type="text" value="14"/> / <input type="text" value="2021"/>
City Glencoe	State IL	Zip Code 60022-1706
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRP9HF5</b>
Name of Employer (for Individual) Bond Companies		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) Real Estate		<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="500.00"/>	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="30500.00"/>
<b>TOTAL</b> 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 28 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Brandon, Sarah, , ,</b>			Date of Receipt
Mailing Address 22325 Rye Rd			<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2021"/>
City Shaker Heights	State OH	Zip Code 44122-3041	<b>Transaction ID : VVC9XRKQRGO</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer (for Individual) Howard Hanna		Occupation (for Individual) Realtor	<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="500.00"/>		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bronstein, Eric, , ,</b>			Date of Receipt
Mailing Address 12928 Vernon Ave			<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2021"/>
City Huntington Woods	State MI	Zip Code 48070-1450	<b>Transaction ID : VVC9XRP9H80</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer (for Individual) The Scion Group		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="500.00"/>		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Candau, Julie, , ,</b>			Date of Receipt
Mailing Address 21 Monte Crest Ct			<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2021"/>
City Walnut Creek	State CA	Zip Code 94595-2659	<b>Transaction ID : VVC9XRP9D81</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="40500.00"/>
Name of Employer (for Individual) Marble Bridge Funding Group		Occupation (for Individual) HR Manager	<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="40500.00"/>		Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="41500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**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 29 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Coben, Jerome, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10375 Wilshire Blvd  
 Ph E  
 City Los Angeles State CA Zip Code 90024-4749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2021  
**Transaction ID : VVC9XRKRJ90**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Non-Contribution Account

**B. Cohen, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 Byron Ln  
 City Larchmont State NY Zip Code 10538-1618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) R.A. Cohen & Associates, Inc. Occupation (for Individual) Real Estate  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 26 / 2021  
**Transaction ID : VVC9XRJQZM3**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Non-Contribution Account

**C. Cooper, Milton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Red Ground Rd  
 City Old Westbury State NY Zip Code 11568-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kimco Occupation (for Individual) Chairman  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 45000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2021  
**Transaction ID : VVC9XRF2BJ5**  
 Amount of Each Receipt this Period  
 20000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	26000.00
<b>TOTAL</b> 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 30 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Cooper, Milton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Red Ground Rd  
 City Old Westbury State NY Zip Code 11568-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kimco Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 45000.00

Date of Receipt **07 / 13 / 2021**  
**Transaction ID : VVC9XRP9H98**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 Non-Contribution Account

**B. Dalezman, Jone, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Oakwood Rd  
 City Newton State MA Zip Code 02460-2417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 25 / 2021**  
**Transaction ID : VVC9XRJQZ64**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**C. Darivoff, Philip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Farmstead Rd  
 City Short Hills State NJ Zip Code 07078-1291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **06 / 13 / 2021**  
**Transaction ID : VVC9XRK7YT6**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40000.00  
**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 31 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Davis, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 N Riverside Plz  
 Ste 5100  
 City Chicago State IL Zip Code 60606-1595  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Linden Capital Partners Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **07 / 09 / 2021**  
**Transaction ID : VVC9XRP9DA7**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 Non-Contribution Account

**B. De Toledo, Philip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3611 Longridge Ave  
 City Sherman Oaks State CA Zip Code 91423-4917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **06 / 08 / 2021**  
**Transaction ID : VVC9XRK1KZ4**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
 Non-Contribution Account

**C. Diamond, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 805 N Milwaukee Ave  
 City Chicago State IL Zip Code 60642-1256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **06 / 29 / 2021**  
**Transaction ID : VVC9XRKW892**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	62000.00
<b>TOTAL</b> 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 32 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Dow, Melvin, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11107 Hedwig Ln  
 City Houston State TX Zip Code 77024-6715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 02 / 2021**  
**Transaction ID : VVC9XRKYEE0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Engel, Matt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 Soundview Ln  
 City Sands Point State NY Zip Code 11050-1342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Langsam Property Services Corp. Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 27 / 2021**  
**Transaction ID : VVC9XRJQZK5**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Non-Contribution Account

**C. Epstein, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 Arlington St  
 City Birmingham State MI Zip Code 48009-1669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AJM Packaging Corporation Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **06 / 07 / 2021**  
**Transaction ID : VVC9XRK1KR9**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	28000.00
<b>TOTAL</b> 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 33 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Exter, Neil, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 14 / 2021
Mailing Address 5 Todd Rd		<b>Transaction ID : VVC9XRKRYJ7</b>
City Lexington	State MA	Zip Code 02420-2116
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Third Rock Ventures	Occupation (for Individual) Venture Capitalist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Fastenberg, Leslie, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 07 / 2021
Mailing Address 92 Wheatley Rd		<b>Transaction ID : VVC9XRP9DB5</b>
City Old Westbury	State NY	Zip Code 11568-1212
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Feinstein, Leonard, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 14 / 2021
Mailing Address 2 Jericho Plz		<b>Transaction ID : VVC9XRKHKN3</b>
City Jericho	State NY	Zip Code 11753-1658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 25000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	32500.00
<b>TOTAL</b> 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 34 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Fishman, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16830 Ventura Blvd  
 Ste 400  
 City Encino State CA Zip Code 91436-1726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fishman Block & Diamond Occupation (for Individual) Accountant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt **06 / 14 / 2021**  
**Transaction ID : VVC9XRKCFY4**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item  
 Non-Contribution Account

**B. Forchheimer, Jody, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 Thatcher St  
 Apt 4  
 City Brookline State MA Zip Code 02446-3531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fidelity Investments Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **07 / 06 / 2021**  
**Transaction ID : VVC9XRMP839**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 Non-Contribution Account

**C. Franco, Diane, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 524 Metairie Rd  
 City Metairie State LA Zip Code 70005-4308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **06 / 21 / 2021**  
**Transaction ID : VVC9XRKHKF5**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55000.00
<b>TOTAL</b> 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 35 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Fridman, Morton, , ,</b>		Date of Receipt
Mailing Address 826 Winthrop Rd		<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2021"/>
City Teaneck	State NJ	Zip Code 07666-2264
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRJQZ56</b>
Name of Employer (for Individual) Self-Employed		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) Physician		<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="1000.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Friedkin, Amy, , ,</b>		Date of Receipt
Mailing Address 44 Montgomery St		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2021"/>
City San Francisco	State CA	Zip Code 94104-4602
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRJQZ96</b>
Name of Employer (for Individual) N/A		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual) Not Employed		<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="2500.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Genderson, Bruce, , ,</b>		Date of Receipt
Mailing Address 10913 Earlsgate Ln		<input type="text" value="02"/> / <input type="text" value="22"/> / <input type="text" value="2021"/>
City Rockville	State MD	Zip Code 20852-4552
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRET130</b>
Name of Employer (for Individual) Williams & Connolly LLP		Amount of Each Receipt this Period <input type="text" value="500.00"/>
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="500.00"/>	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**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 36 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gindi, Alan, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 26 / 2021
Mailing Address 10100 Culver Blvd Ste D		<b>Transaction ID : VVC9XRJQZ72</b>
City Culver City	State CA	Zip Code 90232-3174
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) BAG Investments	Occupation (for Individual) Real Estate Investment	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Goldman, Bruce, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2021
Mailing Address 9532 Mountainair Ave		<b>Transaction ID : VVC9XREF5T6</b>
City Las Vegas	State NV	Zip Code 89134-6221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Goldstein, Larry, J, ,</b>		Date of Receipt MM / DD / YYYY 02 / 10 / 2021
Mailing Address 2 Stratton Rd		<b>Transaction ID : VVC9XREDV77</b>
City Purchase	State NY	Zip Code 10577-2224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Investor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	37100.00
<b>TOTAL</b> 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 37 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Goldstein, Richard, , ,</b>			Date of Receipt MM / DD / YYYY 02 / 19 / 2021 <b>Transaction ID : VVC9XREM590</b>
Mailing Address 4550 N Park Ave Apt 210			Amount of Each Receipt this Period 1000.00
City Chevy Chase	State MD	Zip Code 20815-7235	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			Non-Contribution Account
Name of Employer (for Individual) Nixon Peabody		Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Greenberg, Lawrence, D, ,</b>			Date of Receipt MM / DD / YYYY 05 / 28 / 2021 <b>Transaction ID : VVC9XRJQZA4</b>
Mailing Address 4 Nottingham Ln			Amount of Each Receipt this Period 10000.00
City Weston	State MA	Zip Code 02493-1344	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			Non-Contribution Account
Name of Employer (for Individual) N/A		Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 30000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Greenberg, Lawrence, D, ,</b>			Date of Receipt MM / DD / YYYY 06 / 09 / 2021 <b>Transaction ID : VVC9XRK7YY8</b>
Mailing Address 4 Nottingham Ln			Amount of Each Receipt this Period 20000.00
City Weston	State MA	Zip Code 02493-1344	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			Non-Contribution Account
Name of Employer (for Individual) N/A		Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 30000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	31000.00
<b>TOTAL</b> 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 38 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Greenwall, Francis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6801 Collins Ave  
 Apt 1215  
 City Miami Beach State FL Zip Code 33141-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Talcott Holdings Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 17 / 2021  
**Transaction ID : VVC9XRKHKJ9**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Non-Contribution Account

**B. Hackman, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11111 Santa Monica Blvd  
 Ste 750  
 City Los Angeles State CA Zip Code 90025-3990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hackman Capital Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 07 / 05 / 2021  
**Transaction ID : VVC9XRP9DD0**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 Non-Contribution Account

**C. Heller, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 Rydalwood Ln  
 City Chagrin Falls State OH Zip Code 44022-6870  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The NRP Group LLC Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 23 / 2021  
**Transaction ID : VVC9XRET123**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	37500.00
<b>TOTAL</b> 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 39 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Herenstein, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Dogwood Ln  
 City Lawrence State NY Zip Code 11559-1820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Monarch Alternative Capital Occupation (for Individual) Investment Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 12 / 2021**  
**Transaction ID : VVC9XRP9H49**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**B. Hochberg, Larry, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 E Pearson St Apt 6105  
 City Chicago State IL Zip Code 60611-2190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 09 / 2021**  
**Transaction ID : VVC9XRK2GM9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**C. Holdstein, Russell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Buckeye Way  
 City Kentfield State CA Zip Code 94904-2602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Businessman  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5008.00

Date of Receipt **07 / 08 / 2021**  
**Transaction ID : VVC9XRP9HH1**  
 Amount of Each Receipt this Period 5008.00  
 Memo Item  
 \* Non-Contribution Account - In-Kind of Pfizer Stock

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> 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 40 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Horowitz, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wenwood Dr  
 City Glen Head State NY Zip Code 11545-3127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tasty Brands Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **06 / 07 / 2021**  
**Transaction ID : VVC9XRK1KX8**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 Non-Contribution Account

**B. Huber, Jami, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 S Australian Ave Ste 500  
 City West Palm Beach State FL Zip Code 33401-6206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **06 / 09 / 2021**  
**Transaction ID : VVC9XRK7YZ5**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**C. Isenberg, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4400 W 87th Ter  
 City Prairie Village State KS Zip Code 66207-1918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **06 / 17 / 2021**  
**Transaction ID : VVC9XRKHKH1**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11750.00
<b>TOTAL</b> 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 41 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Jaffee, Scott, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2021
Mailing Address 60 Cuttermill Rd Ste 200		<b>Transaction ID : VVC9XRK1KN5</b>
City Great Neck	State NY	Zip Code 11021-3132
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) Metropolitan Realty Group	Occupation (for Individual) Real Estate	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Kadisha, Neil, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 14 / 2021
Mailing Address 9420 Wilshire Blvd Ste 400		<b>Transaction ID : VVC9XRKCFX6</b>
City Beverly Hills	State CA	Zip Code 90212-3151
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18000.00
Name of Employer (for Individual) Omninet Capital	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 18000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Kaiser, Philip, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2021
Mailing Address 2718 S Florence Ave		<b>Transaction ID : VVC9XREM5C4</b>
City Tulsa	State OK	Zip Code 74114-5737
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Restaurateur	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	38000.00
<b>TOTAL</b> 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 42 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kaminetsky, Bernard, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 27 / 2021
Mailing Address 7991 Tennyson Ct		<b>Transaction ID : VVC9XRJQZE5</b>
City Boca Raton	State FL	Zip Code 33433-4145
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) MDVIP Inc.	Occupation (for Individual) Physician	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Kaminetsky, Bernard, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 29 / 2021
Mailing Address 7991 Tennyson Ct		<b>Transaction ID : VVC9XRKW8A0</b>
City Boca Raton	State FL	Zip Code 33433-4145
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual) MDVIP Inc.	Occupation (for Individual) Physician	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Kanfer, Joe, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 06 / 2021
Mailing Address 1 Gojo Plz		<b>Transaction ID : VVC9XRH13Z6</b>
City Akron	State OH	Zip Code 44311-1057
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20000.00
Name of Employer (for Individual) Walnut Ridge Strategic Mgmt	Occupation (for Individual) Venturer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 20000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	22500.00
<b>TOTAL</b> 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 43 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Kaplin, Ned, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 70 Portland Rd  
 City W Cnshohocken State PA Zip Code 19428-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Briara Trading Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2021  
**Transaction ID : VVC9XRK7Z11**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**B. Kapner, Hilary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6525 Kenhill Rd  
 City Bethesda State MD Zip Code 20817-6011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HSK Consulting, LLC Occupation (for Individual) Nonprofit Management Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 07 / 2021  
**Transaction ID : VVC9XRK1KT5**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**C. Kapner, Hilary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6525 Kenhill Rd  
 City Bethesda State MD Zip Code 20817-6011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HSK Consulting, LLC Occupation (for Individual) Nonprofit Management Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 07 / 12 / 2021  
**Transaction ID : VVC9XRP9H56**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 44 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kassen, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 26 / 2021
Mailing Address 5 Yankee Hill Rd		<b>Transaction ID : VVC9XRJQZF3</b>
City Westport	State CT	Zip Code 06880-6530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Investor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Keston, Linda, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2021
Mailing Address 701 Halliday Ave		<b>Transaction ID : VVC9XRK1KS7</b>
City Los Angeles	State CA	Zip Code 90049-2041
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Klinghoffer, Lori, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 01 / 2021
Mailing Address 33 Wildwood Dr		<b>Transaction ID : VVC9XRMP863</b>
City Short Hills	State NJ	Zip Code 07078-3027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Valcor Engineering Corp.	Occupation (for Individual) Executive	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20000.00
<b>TOTAL</b> 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 45 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Kohn Family Trust**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11100 Santa Monica Blvd  
FI 16

City Los Angeles State CA Zip Code 90025-3384

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 ▼  
50000.00

Date of Receipt  
06 / 10 / 2021  
**Transaction ID : VVC9XRK2GP5**

Amount of Each Receipt this Period  
50000.00

Memo Item

Non-Contribution Account

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

Mailing Address 11100 Santa Monica Blvd  
FI 16

City Los Angeles State CA Zip Code 90025-3384

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

Name of Employer (for Individual) Occupation (for Individual)  
Capital Group Companies, Inc. Financial Analyst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
06 / 10 / 2021  
**Transaction ID : VVC9XRK2R99**

Amount of Each Receipt this Period  
50000.00

Memo Item

Non-Contribution Account

**C. Kopel, Reuben, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 330 E 75th St  
Apt 15B

City New York State NY Zip Code 10021-3086

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

Name of Employer (for Individual) Occupation (for Individual)  
Eden Global Partners LLC Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 24 / 2021  
**Transaction ID : VVC9XRKQRA2**

Amount of Each Receipt this Period  
500.00

Memo Item

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50500.00
<b>TOTAL</b> 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 46 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Koss, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12410 Santa Monica Blvd  
 City Los Angeles State CA Zip Code 90025-2522  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 07 / 2021**  
**Transaction ID : VVC9XRK1KY6**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**B. Lappin, Andy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 630 Lincoln Ave  
 City Glencoe State IL Zip Code 60022-1421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shetland Properties Occupation (for Individual) Real Estate Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **07 / 14 / 2021**  
**Transaction ID : VVC9XRP9HG3**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Non-Contribution Account

**C. Lazar, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5342 Aldea Ave  
 City Encino State CA Zip Code 91316-2646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vitalex, LLC Occupation (for Individual) Physician Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 21 / 2021**  
**Transaction ID : VVC9XRKQRJ6**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00  
**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 47 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Levow, Alan, D, ,</b>		Date of Receipt MM / DD / YYYY 06 / 08 / 2021 <b>Transaction ID : VVC9XRK1M10</b>
Mailing Address 3400 Peachtree Rd NE Ste 1025		Amount of Each Receipt this Period 10000.00
City Atlanta	State GA	Zip Code 30326-1188
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Crowne Partners	Occupation (for Individual) Real Estate Development	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 45000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Levow, Alan, D, ,</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2021 <b>Transaction ID : VVC9XRP9HA6</b>
Mailing Address 3400 Peachtree Rd NE Ste 1025		Amount of Each Receipt this Period 15000.00
City Atlanta	State GA	Zip Code 30326-1188
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Crowne Partners	Occupation (for Individual) Real Estate Development	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 45000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Levy, Edward, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 27 / 2021 <b>Transaction ID : VVC9XRJQZH9</b>
Mailing Address 970 Shirley Rd		Amount of Each Receipt this Period 15000.00
City Birmingham	State MI	Zip Code 48009-3730
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Edw. C. Levy Co.	Occupation (for Individual) Executive Chairman	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 15000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40000.00
<b>TOTAL</b> 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 48 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Lewis, Ann, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 29 / 2021
Mailing Address 4550 N Park Ave Apt 709		<b>Transaction ID : VVC9XRE7B40</b>
City Chevy Chase	State MD	Zip Code 20815-7237
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Lewis, Ann, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 01 / 2021
Mailing Address 4550 N Park Ave Apt 709		<b>Transaction ID : VVC9XRE8BM5</b>
City Chevy Chase	State MD	Zip Code 20815-7237
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Maas, Virginia, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 26 / 2021
Mailing Address 609 Walden Dr		<b>Transaction ID : VVC9XRJQZC0</b>
City Beverly Hills	State CA	Zip Code 90210-3108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1500.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16500.00
<b>TOTAL</b> 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 49 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Matros, Richard, , ,</b>		Date of Receipt
Mailing Address 14 Scenic Blf		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2021"/>
City Newport Coast	State CA	Zip Code 92657-2103
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRFY5V4</b>
Name of Employer (for Individual) Sabra Health Care REIT		Amount of Each Receipt this Period <input type="text" value="7000.00"/>
Occupation (for Individual) Real Estate		<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="10000.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Matros, Richard, , ,</b>		Date of Receipt
Mailing Address 14 Scenic Blf		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2021"/>
City Newport Coast	State CA	Zip Code 92657-2103
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRJQZJ7</b>
Name of Employer (for Individual) Sabra Health Care REIT		Amount of Each Receipt this Period <input type="text" value="3000.00"/>
Occupation (for Individual) Real Estate		<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="10000.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Miller, Lee, , ,</b>		Date of Receipt
Mailing Address 11 E Walton St Apt 3502		<input type="text" value="07"/> / <input type="text" value="14"/> / <input type="text" value="2021"/>
City Chicago	State IL	Zip Code 60611-5437
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRP9HE8</b>
Name of Employer (for Individual) Abundant Venture Partners		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) Co-Chair		<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="1000.00"/>	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="11000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**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 50 OF 110
<input 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 checked="" 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)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mindlin, Bradley, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2021
Mailing Address 930 Tahoe Blvd Ste 802-744		<b>Transaction ID : VVC9XRP9HC2</b>
City Incline Village	State NV	Zip Code 89451-9451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) Oro Capital Advisors	Occupation (for Individual) Real Estate	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Pachulski, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2021
Mailing Address 10460 Revuelta Way		<b>Transaction ID : VVC9XRP9DC3</b>
City Los Angeles	State CA	Zip Code 90077-3805
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) Pachulski, Stang, Ziehl & Jones	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 ▼ 25000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Pava, Ann, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 12 / 2021
Mailing Address 30 Mohawk Dr		<b>Transaction ID : VVC9XRP9H15</b>
City West Hartford	State CT	Zip Code 06117-2227
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	36000.00
<b>TOTAL</b> 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 51 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Pincus, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 108 Rockford Grove Ln  
 City Wilmington State DE Zip Code 19806-2246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **07 / 13 / 2021**  
**Transaction ID : VVC9XRP9H64**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Non-Contribution Account

**B. Platt, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10393 Strathmore Dr  
 City Los Angeles State CA Zip Code 90024-2538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marc Platt Productions Occupation (for Individual) Producer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **06 / 23 / 2021**  
**Transaction ID : VVC9XRKQRE4**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 Non-Contribution Account

**C. Porter, Barry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11601 Wilshire Blvd Ste 1600  
 City Los Angeles State CA Zip Code 90025-0317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Clarity Management Occupation (for Individual) Investments  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 45000.00

Date of Receipt **06 / 18 / 2021**  
**Transaction ID : VVC9XRKHKG3**  
 Amount of Each Receipt this Period 45000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	72500.00
<b>TOTAL</b> 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 52 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Radow, Norman, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2021
Mailing Address 400 Galleria Pkwy SE Ste 1200		<b>Transaction ID : VVC9XRK1KM7</b>
City Atlanta	State GA	Zip Code 30339-5993
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) RADCO	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Rembaum, Pam, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 09 / 2021
Mailing Address 10259 Hunt Club Ln		<b>Transaction ID : VVC9XRK7YX0</b>
City Palm Beach Gardens	State FL	Zip Code 33418-4574
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Campbell Property Management	Occupation (for Individual) Accountant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ritchie, Stephen, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2021
Mailing Address 884 Bluff St		<b>Transaction ID : VVC9XRP9HB4</b>
City Glencoe	State IL	Zip Code 60022-1573
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) Kirkland & Ellis 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 ▼ 2500.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13000.00
<b>TOTAL</b> 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 53 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Roberts, Philip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1808 Nob Hill Ave N  
 City Seattle State WA Zip Code 98109-2846  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ryan, Swanson & Cleveland, PLLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 09 / 2021**  
**Transaction ID : VVC9XRK7YW2**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**B. Rodan, Amnon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6114 La Salle Ave # 442  
 City Oakland State CA Zip Code 94611-2802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rodan & Fields Occupation (for Individual) Business Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 145000.00

Date of Receipt **03 / 02 / 2021**  
**Transaction ID : VVC9XREJCH2**  
 Amount of Each Receipt this Period 145000.00  
 Memo Item  
 Non-Contribution Account

**C. Rombom, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 310 E Shore Rd  
 City Great Neck State NY Zip Code 11023-2410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 22 / 2021**  
**Transaction ID : VVC9XRFY5W2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	146500.00
<b>TOTAL</b> 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 54 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Rombom, Howard, , ,</b>		Date of Receipt
Mailing Address 310 E Shore Rd		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2021"/>
City Great Neck	State NY	Zip Code 11023-2410
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRJQZ30</b>
Name of Employer (for Individual) Self-Employed		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) Psychologist		<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="1000.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Rosen, David, , ,</b>		Date of Receipt
Mailing Address 111 Morris Ln S		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2021"/>
City Scarsdale	State NY	Zip Code 10583-6056
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRJQZP9</b>
Name of Employer (for Individual) Rubric Capital		Amount of Each Receipt this Period <input type="text" value="20000.00"/>
Occupation (for Individual) Financial Analyst		<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="20000.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Rubin, Mark, H, ,</b>		Date of Receipt
Mailing Address 84 Bigelow Rd		<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2021"/>
City West Newton	State MA	Zip Code 02465-3006
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRK1M28</b>
Name of Employer (for Individual) Maric, Inc.		Amount of Each Receipt this Period <input type="text" value="25000.00"/>
Occupation (for Individual) Business Manager		<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="25000.00"/>	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="45500.00"/>
<b>TOTAL</b> 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 55 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Ruby, Kenneth, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 424 S Cliffwood Ave  
 City Los Angeles State CA Zip Code 90049-3828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ruby Group Companies Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 08 / 2021**  
**Transaction ID : VVC9XRK1M02**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**B. Rudy, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 S Weston Ln  
 City Austin State TX Zip Code 78733-4211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 26 / 2021**  
**Transaction ID : VVC9XRJQZB2**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**C. Rudzki, Lewis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1612 S Beverly Dr  
 City Los Angeles State CA Zip Code 90035-3006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Canon Equity Partners LLC Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 27 / 2021**  
**Transaction ID : VVC9XRJQZ15**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 56 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Schall, Brian, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2021
Mailing Address 417 S Cochran Ave		<b>Transaction ID : VVC9XRKW8B7</b>
City Los Angeles	State CA	Zip Code 90036-3301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer (for Individual) Schall Law Firm	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 ▼ 10000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Schall, Brian, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2021
Mailing Address 417 S Cochran Ave		<b>Transaction ID : VVC9XRKW876</b>
City Los Angeles	State CA	Zip Code 90036-3301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer (for Individual) Schall Law Firm	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 ▼ 10000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Schall, Brian, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2021
Mailing Address 417 S Cochran Ave		<b>Transaction ID : VVC9XRKW884</b>
City Los Angeles	State CA	Zip Code 90036-3301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) Schall Law Firm	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 ▼ 10000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7400.00
<b>TOTAL</b> 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 57 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Schall, Brian, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 01 / 2021
Mailing Address 417 S Cochran Ave		<b>Transaction ID : VVC9XRMP870</b>
City Los Angeles	State CA	Zip Code 90036-3301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer (for Individual) Schall Law Firm	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 ▼ 10000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Schleifer, Harriet, P, ,</b>		Date of Receipt MM / DD / YYYY 07 / 01 / 2021
Mailing Address 49 Carolyn Pl		<b>Transaction ID : VVC9XRKYED2</b>
City Chappaqua	State NY	Zip Code 10514-2916
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Schocken, Joseph, L, ,</b>		Date of Receipt MM / DD / YYYY 06 / 14 / 2021
Mailing Address 5911 77th Ave SE		<b>Transaction ID : VVC9XRKHKM5</b>
City Mercer Island	State WA	Zip Code 98040-4815
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Tranceka Capital LLC	Occupation (for Individual) Investment Banker	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32600.00
<b>TOTAL</b> 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 58 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Schusterman, Stacy, H, ,</b>		Date of Receipt
Mailing Address 110 W 7th St		<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2021"/>
City Tulsa	State OK	Zip Code 74119-1031
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRGK1B4</b>
Name of Employer (for Individual) Samson Energy Company, LLC		Occupation (for Individual) Chair
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="95000.00"/>	Amount of Each Receipt this Period <input type="text" value="95000.00"/>
		<input type="checkbox"/> Memo Item
		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Shay, Scott, , ,</b>		Date of Receipt
Mailing Address 75 E End Ave Apt 8E		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2021"/>
City New York	State NY	Zip Code 10028-7914
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRF7DJ7</b>
Name of Employer (for Individual) Signature Bank		Occupation (for Individual) Banker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<input type="checkbox"/> Memo Item
		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sherman, Jane, , ,</b>		Date of Receipt
Mailing Address 4770 S Chipping Gln		<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2021"/>
City Bloomfield Hills	State MI	Zip Code 48302-2304
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VVC9XRP9H31</b>
Name of Employer (for Individual) N/A		Occupation (for Individual) Not Employed
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="checkbox"/> Memo Item
		Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="100500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**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 59 OF 110
<input 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 checked="" 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)  
**DMFI PAC**

**A. Siegel, Matthew, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11505 High Dr

City Leawood	State KS	Zip Code 66211-3082
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MAS, Inc.	Occupation (for Individual) Commodity Trader
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2021

**Transaction ID : VVC9XRK1KQ1**

Amount of Each Receipt this Period  
2500.00

Memo Item

Non-Contribution Account

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

Mailing Address 5813 Mossrock Dr

City Rockville	State MD	Zip Code 20852-3238
-------------------	-------------	------------------------

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

Name of Employer (for Individual) CRT Management	Occupation (for Individual) Real Estate
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2021

**Transaction ID : VVC9XRJQZQ6**

Amount of Each Receipt this Period  
5000.00

Memo Item

Non-Contribution Account

**C. Sperling, Scott, M, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 Federal St

City Boston	State MA	Zip Code 02110-1802
----------------	-------------	------------------------

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

Name of Employer (for Individual) Thomas H Lee Partners LP	Occupation (for Individual) Co-President
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
7000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2021

**Transaction ID : VVC9XRKJFP0**

Amount of Each Receipt this Period  
7000.00

Memo Item

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14500.00
<b>TOTAL</b> 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 60 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sprayregen, James, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2021 <b>Transaction ID : VVC9XRK7Z29</b>
Mailing Address 521 Longwood Ave		Amount of Each Receipt this Period 2500.00
City Glencoe	State IL	Zip Code 60022-1736
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Kirkland & Ellis LLP	Occupation (for Individual) Attorney	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sterling, David, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2021 <b>Transaction ID : VVC9XRK1KW0</b>
Mailing Address 33 Windsor Dr		Amount of Each Receipt this Period 25000.00
City Jericho	State NY	Zip Code 11753-1327
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SterlingRisk	Occupation (for Individual) Insurance	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Swidler, Barry, J, ,</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2021 <b>Transaction ID : VVC9XRETBS5</b>
Mailing Address 17291 White Haven Dr		Amount of Each Receipt this Period 1000.00
City Boca Raton	State FL	Zip Code 33496-5925
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Fire Restoration, LLC	Occupation (for Individual) President	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	28500.00
<b>TOTAL</b> 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 61 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Targeted Platform Media, LLC**

Mailing Address PO Box 237

City Crownsville	State MD	Zip Code 21032-0237
---------------------	-------------	------------------------

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 ▼  
1538.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2021

**Transaction ID : VVC9XRET148**

Amount of Each Receipt this Period  
1538.50

Memo Item

Non-Contribution Account - Refund

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

Mailing Address 608 N Beverly Dr

City Beverly Hills	State CA	Zip Code 90210-3320
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Matchmaster Inc	Occupation (for Individual) Vice President
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2021

**Transaction ID : VVC9XRJQZ88**

Amount of Each Receipt this Period  
10000.00

Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Tuchin, Michael, , ,**

Mailing Address 1801 Century Park E  
FI 26

City Los Angeles	State CA	Zip Code 90067-2302
---------------------	-------------	------------------------

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

Name of Employer (for Individual) KTBS Law LLP	Occupation (for Individual) Lawyer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2021

**Transaction ID : VVC9XRKQRBO**

Amount of Each Receipt this Period  
10000.00

Memo Item

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	21538.50
<b>TOTAL</b> 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 62 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Tuchman, Morris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 134 Lexington Ave  
 City New York State NY Zip Code 10016-8107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **06 / 25 / 2021**  
**Transaction ID : VVC9XRKQR94**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 Non-Contribution Account

**B. Viterbi, Alan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 Prospect St Unit 303  
 City La Jolla State CA Zip Code 92037-4162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Liquid Environmental Solutions Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 45000.00

Date of Receipt **04 / 07 / 2021**  
**Transaction ID : VVC9XRH1319**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item  
 Non-Contribution Account

**C. Viterbi, Alan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 Prospect St Unit 303  
 City La Jolla State CA Zip Code 92037-4162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Liquid Environmental Solutions Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 45000.00

Date of Receipt **07 / 12 / 2021**  
**Transaction ID : VVC9XRP9H23**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55000.00
<b>TOTAL</b> 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 63 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Viterbi, Andrew, J, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2712 Glenwick Pl

City La Jolla	State CA	Zip Code 92037-2040
------------------	-------------	------------------------

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

Name of Employer (for Individual) Viterbi Group, LLC	Occupation (for Individual) President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2021

**Transaction ID : VVC9XRGK1D0**

Amount of Each Receipt this Period  
20000.00

Memo Item

Non-Contribution Account

**B. Viterbi, Andrew, J, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2712 Glenwick Pl

City La Jolla	State CA	Zip Code 92037-2040
------------------	-------------	------------------------

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

Name of Employer (for Individual) Viterbi Group, LLC	Occupation (for Individual) President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2021

**Transaction ID : VVC9XRP9D73**

Amount of Each Receipt this Period  
25000.00

Memo Item

Non-Contribution Account

**C. Wachtel, Arthur, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 975 Greenhill Rd

City Mill Valley	State CA	Zip Code 94941-3451
---------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2021

**Transaction ID : VVC9XRP9H72**

Amount of Each Receipt this Period  
5000.00

Memo Item

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50000.00
<b>TOTAL</b> 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 64 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Waisman, Shai, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6A Pryer Ln  
 City Larchmont State NY Zip Code 10538-4021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kroll Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt **05 / 27 / 2021**  
**Transaction ID : VVC9XRJQZG1**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item  
 Non-Contribution Account

**B. Wallack, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Idlewile Ln  
 City Weston State MA Zip Code 02493-1922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 07 / 2021**  
**Transaction ID : VVC9XRK1KP3**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Non-Contribution Account

**C. Welinsky, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10525 Bloomfield St  
 City Toluca Lake State CA Zip Code 91602-2812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 30 / 2021**  
**Transaction ID : VVC9XRJQZD7**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	22500.00
<b>TOTAL</b> 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 65 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Wolens, Keenan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 814 N Roxbury Dr  
 City Beverly Hills State CA Zip Code 90210-3018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amir Development Co Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 05 / 27 / 2021  
**Transaction ID : VVC9XRJQZ23**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item  
 Non-Contribution Account

**B. Wuliger, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Basswood Ln  
 City Moreland Hills State OH Zip Code 44022-1377  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mallard Investments Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 27 / 2021  
**Transaction ID : VVC9XRJQZ48**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**C. Wuliger, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Basswood Ln  
 City Moreland Hills State OH Zip Code 44022-1377  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mallard Investments Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 27 / 2021  
**Transaction ID : VVC9XRJQZN1**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40000.00
<b>TOTAL</b> 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 66 OF 110
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Zakowski, Jan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1331 Warnall Ave  
 City Los Angeles State CA Zip Code 90024-5355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Americal Management Inc. Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 07 / 2021**  
**Transaction ID : VVC9XRK1KV2**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**B. Ziman, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1801 Century Park E  
 City Los Angeles State CA Zip Code 90067-2302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rexford Industrial Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 10 / 2021**  
**Transaction ID : VVC9XRK7YV4**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item  
 Non-Contribution Account

**C. Ziman, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1801 Century Park E  
 City Los Angeles State CA Zip Code 90067-2302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rexford Industrial Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 15 / 2021**  
**Transaction ID : VVC9XRKHKK7**  
 Amount of Each Receipt this Period 2200.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	1446888.50

**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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)  
**A. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 31 / 2021

FEC Identification Number  
C  
Transaction ID : VVBANAQM8  
Amount of Each Disbursement this Period  
197.50

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 31 / 2021

FEC Identification Number  
C  
Transaction ID : VVBANAQM8  
Amount of Each Disbursement this Period  
2.38

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 07 / 2021

FEC Identification Number  
C  
Transaction ID : VVBANAQM8  
Amount of Each Disbursement this Period  
18.16

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 218.04

**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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2021	
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQME</b> Amount of Each Disbursement this Period [ ] 71.30	
City West Somerville	State MA	Zip Code 02144-0031	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2021	
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQMH</b> Amount of Each Disbursement this Period [ ] 146.59	
City West Somerville	State MA	Zip Code 02144-0031	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2021	
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQM'</b> Amount of Each Disbursement this Period [ ] 120.59	
City West Somerville	State MA	Zip Code 02144-0031	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 338.48
<b>TOTAL</b> 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)  
**DMFI PAC**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 07 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQNE

Amount of Each Disbursement this Period: 144.56

Memo Item

**B. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 07 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQNE

Amount of Each Disbursement this Period: 197.50

Memo Item

**C. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 14 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQNE

Amount of Each Disbursement this Period: 197.90

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 539.96

**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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQNJ</b> Amount of Each Disbursement this Period [ ] 15.55
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQNJ</b> Amount of Each Disbursement this Period [ ] 197.50
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQNJ</b> Amount of Each Disbursement this Period [ ] 5.38
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 218.43
<b>TOTAL</b> 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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2021

Mailing Address PO Box 441146

FEC Identification Number

C [ ]

**Transaction ID : VVBANAQNT**  
Amount of Each Disbursement this Period

[ ] 4.88

Memo Item

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

[ ]  
Category/  
Type

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		04		2021

Mailing Address PO Box 441146

FEC Identification Number

C [ ]

**Transaction ID : VVBANAQP9I**  
Amount of Each Disbursement this Period

[ ] 9.24

Memo Item

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

[ ]  
Category/  
Type

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2021

Mailing Address PO Box 441146

FEC Identification Number

C [ ]

**Transaction ID : VVBANAQPE**  
Amount of Each Disbursement this Period

[ ] 3.03

Memo Item

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

[ ]  
Category/  
Type

Candidate Name

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

State: District:

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

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

[ ] 17.15

[ ]

**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)  
**DMFI PAC**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPE

Amount of Each Disbursement this Period: 395.00

Memo Item

**B. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPG

Amount of Each Disbursement this Period: 58.43

Memo Item

**C. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 25 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPJ

Amount of Each Disbursement this Period: 57.33

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 510.76

**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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

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 : VVBANAQPJ**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

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 : VVBANAQQ0**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

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 : VVBANAQQ!**  
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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQQK</b> Amount of Each Disbursement this Period [ ] 55.41
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQQK</b> Amount of Each Disbursement this Period [ ] 144.30
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQQK</b> Amount of Each Disbursement this Period [ ] 290.13
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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)..... ▶

489.84

**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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQQH</b> Amount of Each Disbursement this Period [ ] 7.98
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQRH</b> Amount of Each Disbursement this Period [ ] 75.66
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQRH</b> Amount of Each Disbursement this Period [ ] 197.50
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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)..... ▶

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

281.14

**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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2021	
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQRR</b> Amount of Each Disbursement this Period [ ] 258.48	
City West Somerville	State MA	Zip Code 02144-0031	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2021	
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQS2!</b> Amount of Each Disbursement this Period [ ] 197.50	
City West Somerville	State MA	Zip Code 02144-0031	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2021	
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQS4</b> Amount of Each Disbursement this Period [ ] 12.40	
City West Somerville	State MA	Zip Code 02144-0031	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 468.38
<b>TOTAL</b> 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)  
**DMFI PAC**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 27 / 2021

FEC Identification Number: C [ ]  
Transaction ID : VVBANAQS5  
Amount of Each Disbursement this Period: [ ] 1.01

Memo Item

**B. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2021

FEC Identification Number: C [ ]  
Transaction ID : VVBANAQS5  
Amount of Each Disbursement this Period: [ ] 42.44

Memo Item

**C. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 04 / 2021

FEC Identification Number: C [ ]  
Transaction ID : VVBANAQTL  
Amount of Each Disbursement this Period: [ ] 35.52

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ [ ] 78.97

**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)  
**DMFI PAC**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 11 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQTD

Amount of Each Disbursement this Period: 177.75

Memo Item

**B. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 11 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQTD

Amount of Each Disbursement this Period: 15.83

Memo Item

**C. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 14 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQTC

Amount of Each Disbursement this Period: 100.14

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 293.72

**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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. Beth A. Dindas Consulting, LLC</b>			Date of Disbursement MM / DD / YYYY 05 / 03 / 2021	
Mailing Address 30 Chatham Rd			FEC Identification Number C [ ] <b>Transaction ID : VVBANAQPT</b> Amount of Each Disbursement this Period [ ] 2500.00	
City Longmeadow	State MA	Zip Code 01106-1204	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising Consulting Services		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:				

Full Name (Last, First, Middle Initial) <b>B. Beth A. Dindas Consulting, LLC</b>			Date of Disbursement MM / DD / YYYY 06 / 02 / 2021	
Mailing Address 30 Chatham Rd			FEC Identification Number C [ ] <b>Transaction ID : VVBANAQQV</b> Amount of Each Disbursement this Period [ ] 5000.00	
City Longmeadow	State MA	Zip Code 01106-1204	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising Consulting Services		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:				

Full Name (Last, First, Middle Initial) <b>C. Beth A. Dindas Consulting, LLC</b>			Date of Disbursement MM / DD / YYYY 06 / 29 / 2021	
Mailing Address 30 Chatham Rd			FEC Identification Number C [ ] <b>Transaction ID : VVBANAQS4</b> Amount of Each Disbursement this Period [ ] 5000.00	
City Longmeadow	State MA	Zip Code 01106-1204	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising Consulting Services		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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 12500.00
<b>TOTAL</b> 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)  
**DMFI PAC**

**A. Democratic Majority for Israel**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1023 31st St NW  
Ste 530

M M M	/	D D D	/	Y Y Y Y Y
04		27		2021

City Washington State DC Zip Code 20007-4458

FEC Identification Number

Purpose of Disbursement  
Staff Salaries

C
---

Transaction ID : **VVBANAQPG**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

3539.20
---------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

**B. Trilogy Interactive, LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 4177

M M M	/	D D D	/	Y Y Y Y Y
04		02		2021

City Mountain View State CA Zip Code 94040-0177

FEC Identification Number

Purpose of Disbursement  
Website Services

C
---

Transaction ID : **VVBANAQNT**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

166.67
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

**C. Trilogy Interactive, LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 4177

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

City Mountain View State CA Zip Code 94040-0177

FEC Identification Number

Purpose of Disbursement  
Website Services

C
---

Transaction ID : **VVBANAQQI**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1147.50
---------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

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

4853.37
---------

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

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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 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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)  
**A. Utrecht, Kleinfeld, Fiori, Partners**

Mailing Address 1776 I St NW  
FI 10

City Washington State DC Zip Code 20006-3776

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 25 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQMI**

Amount of Each Disbursement this Period: 1070.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Utrecht, Kleinfeld, Fiori, Partners**

Mailing Address 1776 I St NW  
FI 10

City Washington State DC Zip Code 20006-3776

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQNP**

Amount of Each Disbursement this Period: 2520.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Utrecht, Kleinfeld, Fiori, Partners**

Mailing Address 1776 I St NW  
FI 10

City Washington State DC Zip Code 20006-3776

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 11 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQQI**

Amount of Each Disbursement this Period: 2250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5840.00

**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)  
**DMFI PAC**

**A. Utrecht, Kleinfeld, Fiori, Partners**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 I St NW  
FI 10

City Washington State DC Zip Code 20006-3776

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 03 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQQX

Amount of Each Disbursement this Period: 4520.00

Memo Item

**B. Utrecht, Kleinfeld, Fiori, Partners**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 I St NW  
FI 10

City Washington State DC Zip Code 20006-3776

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 09 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQTD

Amount of Each Disbursement this Period: 4500.00

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)..... ▶ 9020.00

**TOTAL** This Period (last page this line number only)..... ▶ 35884.40

**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)  
**DMFI PAC**

**A. JANA LYNNE SANCHEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 470035

M M M	/	D D D	/	Y Y Y Y Y
04		23		2021

City Fort Worth State TX Zip Code 76147-0035

FEC Identification Number

Purpose of Disbursement Contribution

C	C00769489
---	-----------

Candidate Name  
**SANCHEZ, JANA, , ,**

Category/Type

Transaction ID : **VVBANAQPC**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: TX District: 06

Disbursement For: 2021  
 Primary  General  
 Other (specify) ▼  
Special General

2500.00
---------

Memo Item

**B. JEFFRIES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3430 Connecticut Ave NW  
Unit 11704

M M M	/	D D D	/	Y Y Y Y Y
05		03		2021

City Washington State DC Zip Code 20008-7544

FEC Identification Number

Purpose of Disbursement Contribution

C	C00503052
---	-----------

Candidate Name  
**JEFFRIES, HAKEEM, , ,**

Category/Type

Transaction ID : **VVBANAQPT**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: NY District: 08

Disbursement For: 2022  
 Primary  General  
 Other (specify)

1000.00
---------

Memo Item

**C. JOE MORELLE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 90914

M M M	/	D D D	/	Y Y Y Y Y
04		13		2021

City Rochester State NY Zip Code 14609-0914

FEC Identification Number

Purpose of Disbursement Contribution

C	C00675108
---	-----------

Candidate Name  
**MORELLE, JOSEPH D, , ,**

Category/Type

Transaction ID : **VVBANAQPC**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: NY District: 25

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

1000.00
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Memo Item

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

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

4500.00
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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)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)

### A. JOE MORELLE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2021

Mailing Address PO Box 90914

City Rochester State NY Zip Code 14609-0914

FEC Identification Number

**C** C00675108

Purpose of Disbursement  
Voided Check from 4/13/21

Category/Type

Transaction ID : VVBANAQTD  
Amount of Each Disbursement this Period

- 1000.00

Candidate Name  
**MORELLE, JOSEPH D, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: NY District: 25

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/Type

Amount of Each Disbursement this Period

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/Type

Amount of Each Disbursement this Period

Candidate Name

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

Memo Item

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

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

- 1000.00

3500.00

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

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQME</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 197.50
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQMA</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 395.00
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQMI</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 395.00
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 987.50
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2021
Mailing Address PO Box 441146		FEC Identification Number <b>C</b>
City West Somerville	State MA	
Purpose of Disbursement Credit Card Processing Fees	Zip Code 02144-0031	Amount of Each Disbursement this Period 475.98
Candidate Name	Category/Type	Non-Contribution Account
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2021
Mailing Address PO Box 441146		FEC Identification Number <b>C</b>
City West Somerville	State MA	
Purpose of Disbursement Credit Card Processing Fees	Zip Code 02144-0031	Amount of Each Disbursement this Period 414.75
Candidate Name	Category/Type	Non-Contribution Account
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2021
Mailing Address PO Box 441146		FEC Identification Number <b>C</b>
City West Somerville	State MA	
Purpose of Disbursement Credit Card Processing Fees	Zip Code 02144-0031	Amount of Each Disbursement this Period 790.00
Candidate Name	Category/Type	Non-Contribution Account
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1680.73
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQNJ</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 197.50
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQNT</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 379.20
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQPE</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 1580.00
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2156.70
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)  
**A. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 16 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQQK**

Amount of Each Disbursement this Period: 987.50

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 30 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQQK**

Amount of Each Disbursement this Period: 6991.50

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 31 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQQK**

Amount of Each Disbursement this Period: 197.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8176.50

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQS5</b> Amount of Each Disbursement this Period 4147.50
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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 Non-Contribution Account	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQRB</b> Amount of Each Disbursement this Period 1868.35
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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 Non-Contribution Account	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQRI</b> Amount of Each Disbursement this Period 3197.53
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		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 Non-Contribution Account	

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

9213.38

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQS4</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 197.50
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQS2</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 2844.00
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQS5</b>
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 430.55
Candidate Name		Category/Type [REDACTED]
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3472.05
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)  
**A. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 04 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQSD**

Amount of Each Disbursement this Period: 300.20

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 11 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQTD**

Amount of Each Disbursement this Period: 4068.50

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ActBlue Technical Services**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 14 / 2021

FEC Identification Number: C

Transaction ID : **VVBANAQTC**

Amount of Each Disbursement this Period: 3831.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8200.20

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Democratic Majority for Israel**

Full Name (Last, First, Middle Initial)

Mailing Address 1023 31st St NW  
Ste 530

City Washington State DC Zip Code 20007-4458

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPG

Amount of Each Disbursement this Period: 1983.56

Memo Item

**B. The Mellman Group**

Full Name (Last, First, Middle Initial)

Mailing Address 1023 31st St NW  
FI 5

City Washington State DC Zip Code 20007-4458

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPG

Amount of Each Disbursement this Period: 1983.56

\* Non-Contribution Account

Memo Item

**C. Democratic Majority for Israel**

Full Name (Last, First, Middle Initial)

Mailing Address 1023 31st St NW  
Ste 530

City Washington State DC Zip Code 20007-4458

Purpose of Disbursement Staff Salaries

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPF

Amount of Each Disbursement this Period: 26078.30

Non-Contribution Account

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	28061.86
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Democratic Majority for Israel**

Full Name (Last, First, Middle Initial)

Mailing Address 1023 31st St NW  
Ste 530

City Washington State DC Zip Code 20007-4458

Purpose of Disbursement Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPH

Amount of Each Disbursement this Period: 4379.53

Memo Item

**B. Trilogy Interactive, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4177

City Mountain View State CA Zip Code 94040-0177

Purpose of Disbursement Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPH

Amount of Each Disbursement this Period: 4379.53

\* Non-Contribution Account

Memo Item

**C. Democratic Majority for Israel**

Full Name (Last, First, Middle Initial)

Mailing Address 1023 31st St NW  
Ste 530

City Washington State DC Zip Code 20007-4458

Purpose of Disbursement List Acquisition

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPH

Amount of Each Disbursement this Period: 1394.99

Non-Contribution Account

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5774.52

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. Meltwater</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2021
Mailing Address 465 California St FI 11		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQPH</b> Amount of Each Disbursement this Period [REDACTED] 795.00 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
City San Francisco	State CA	Zip Code 94104-1826
Purpose of Disbursement List Acquisition		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:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2021
Mailing Address 1445 New York Ave NW Ste 200		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQPH</b> Amount of Each Disbursement this Period [REDACTED] 7.95 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20005-2158
Purpose of Disbursement List Acquisition		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:		

Full Name (Last, First, Middle Initial) <b>C. Trilogy Interactive, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2021
Mailing Address PO Box 4177		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQPH</b> Amount of Each Disbursement this Period [REDACTED] 549.64 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
City Mountain View	State CA	Zip Code 94040-0177
Purpose of Disbursement List Acquisition		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)  
**A. Dover Strategy Group, Inc.**

Date of Disbursement: MM / DD / YYYY  
07 / 12 / 2021

Mailing Address 823 N 25th St

City Philadelphia State PA Zip Code 19130-1818

Purpose of Disbursement  
IE Not Yet Disseminated

Candidate Name

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

State: District:

FEC Identification Number  
**C**

Transaction ID : **VVBANAQTT**

Amount of Each Disbursement this Period  
50944.95

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Dover Strategy Group, Inc.**

Date of Disbursement: MM / DD / YYYY  
07 / 12 / 2021

Mailing Address 823 N 25th St

City Philadelphia State PA Zip Code 19130-1818

Purpose of Disbursement  
IE Not Yet Disseminated

Candidate Name

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

State: District:

FEC Identification Number  
**C**

Transaction ID : **VVBANAQTT**

Amount of Each Disbursement this Period  
51044.95

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Intuit**

Date of Disbursement: MM / DD / YYYY  
02 / 22 / 2021

Mailing Address 2800 E Commerce Center PI

City Tucson State AZ Zip Code 85706-4559

Purpose of Disbursement  
Software

Candidate Name

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

State: District:

FEC Identification Number  
**C**

Transaction ID : **VVBANAQMI**

Amount of Each Disbursement this Period  
42.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 102032.30

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Intuit**

Full Name (Last, First, Middle Initial)

Mailing Address 2800 E Commerce Center PI

City Tucson State AZ Zip Code 85706-4559

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 22 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQNE

Amount of Each Disbursement this Period: 42.40

Memo Item

**B. Intuit**

Full Name (Last, First, Middle Initial)

Mailing Address 2800 E Commerce Center PI

City Tucson State AZ Zip Code 85706-4559

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQPJ

Amount of Each Disbursement this Period: 42.40

Memo Item

**C. Intuit**

Full Name (Last, First, Middle Initial)

Mailing Address 2800 E Commerce Center PI

City Tucson State AZ Zip Code 85706-4559

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 20 / 2021

FEC Identification Number: C

Transaction ID : VVBANAQQ

Amount of Each Disbursement this Period: 42.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 127.20

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. Intuit**

Mailing Address 2800 E Commerce Center Pl

City Tucson State AZ Zip Code 85706-4559

Purpose of Disbursement  
Software

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VVBANAQRN**  
Amount of Each Disbursement this Period

Non-Contribution Account  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. Lebin Yates Consulting**

Mailing Address PO Box 41112

City Austin State TX Zip Code 78704-0019

Purpose of Disbursement  
Compliance Services

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VVBANAQM6**  
Amount of Each Disbursement this Period

Non-Contribution Account  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Lebin Yates Consulting**

Mailing Address PO Box 41112

City Austin State TX Zip Code 78704-0019

Purpose of Disbursement  
Compliance Services

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VVBANAQN1**  
Amount of Each Disbursement this Period

Non-Contribution Account  
 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. Lebin Yates Consulting</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2021	
Mailing Address PO Box 41112		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQPC</b> Amount of Each Disbursement this Period 1500.00 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Austin	State TX	Zip Code 78704-0019	Category/ Type
Purpose of Disbursement Compliance Services		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Lebin Yates Consulting</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2021	
Mailing Address PO Box 41112		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQQ0</b> Amount of Each Disbursement this Period 1500.00 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Austin	State TX	Zip Code 78704-0019	Category/ Type
Purpose of Disbursement Compliance Services		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Lebin Yates Consulting</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021	
Mailing Address PO Box 41112		FEC Identification Number C [REDACTED] <b>Transaction ID : VVBANAQRI</b> Amount of Each Disbursement this Period 1500.00 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Austin	State TX	Zip Code 78704-0019	Category/ Type
Purpose of Disbursement Compliance Services		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. Lebin Yates Consulting</b>			Date of Disbursement MM / DD / YYYY 07 / 12 / 2021		
Mailing Address PO Box 41112					
City Austin	State TX	Zip Code 78704-0019	FEC Identification Number C [REDACTED]		
Purpose of Disbursement Compliance Services			Transaction ID : <b>VVBANAQTD</b>		
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 2000.00		
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) ▼		Non-Contribution Account <input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. NGP VAN</b>			Date of Disbursement MM / DD / YYYY 02 / 02 / 2021		
Mailing Address 1445 New York Ave NW Ste 200					
City Washington	State DC	Zip Code 20005-2158	FEC Identification Number C [REDACTED]		
Purpose of Disbursement Database Software & Support			Transaction ID : <b>VVBANAQKV</b>		
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 53.00		
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) ▼		Non-Contribution Account <input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. NGP VAN</b>			Date of Disbursement MM / DD / YYYY 03 / 02 / 2021		
Mailing Address 1445 New York Ave NW Ste 200					
City Washington	State DC	Zip Code 20005-2158	FEC Identification Number C [REDACTED]		
Purpose of Disbursement Database Software & Support			Transaction ID : <b>VVBANAQMI</b>		
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 53.00		
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) ▼		Non-Contribution Account <input type="checkbox"/> Memo Item		
State: District:					

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

2106.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial)

### A. NGP VAN

Mailing Address 1445 New York Ave NW  
Ste 200

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement  
Database Software & Support

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		02		2021

FEC Identification Number

**C** [REDACTED]  
**Transaction ID : VVBANAQNT**  
 Amount of Each Disbursement this Period  
 [REDACTED] 53.00

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. NGP VAN

Mailing Address 1445 New York Ave NW  
Ste 200

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement  
Database Software & Support

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2021

FEC Identification Number

**C** [REDACTED]  
**Transaction ID : VVBANAQPT.**  
 Amount of Each Disbursement this Period  
 [REDACTED] 53.00

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. NGP VAN

Mailing Address 1445 New York Ave NW  
Ste 200

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement  
Database Software & Support

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2021

FEC Identification Number

**C** [REDACTED]  
**Transaction ID : VVBANAQQI**  
 Amount of Each Disbursement this Period  
 [REDACTED] 53.00

Memo Item Non-Contribution Account

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

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

[REDACTED]	159.00
[REDACTED]	[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)

Grid for line numbers 21b-30b with checkboxes, where 29 is checked.

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NAME OF COMMITTEE (In Full)
DMFI PAC

Form A: NGP VAN. Includes fields for Full Name, Mailing Address (1445 New York Ave NW), City (Washington), State (DC), Zip Code (20005-2158), Purpose of Disbursement (Database Software & Support), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (07/02/2021), FEC Identification Number (C), Transaction ID (VVBANAQS8), Amount of Each Disbursement (54.60), and Memo Item checkbox.

Form B: Stanford Campaigns. Includes fields for Full Name, Mailing Address (3800 N Lamar Blvd), City (Austin), State (TX), Zip Code (78756-0003), Purpose of Disbursement (Polling Research), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/09/2021), FEC Identification Number (C), Transaction ID (VVBANAQM2), Amount of Each Disbursement (10000.00), and Memo Item checkbox.

Form C: Stanford Campaigns. Includes fields for Full Name, Mailing Address (3800 N Lamar Blvd), City (Austin), State (TX), Zip Code (78756-0003), Purpose of Disbursement (Polling Research), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/18/2021), FEC Identification Number (C), Transaction ID (VVBANAQN3), Amount of Each Disbursement (10390.00), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 20444.60
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. The Mellman Group</b>		Date of Disbursement MM / DD / YYYY 04 / 29 / 2021
Mailing Address 1023 31st St NW FI 5		FEC Identification Number <b>C</b> Transaction ID : <b>VVBANAQPJ</b> Amount of Each Disbursement this Period 41000.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Polling	Zip Code 20007-4458	FEC Identification Number <b>C</b> Transaction ID : <b>VVBANAQRZ</b> Amount of Each Disbursement this Period 33400.00 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
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>B. The Mellman Group</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2021
Mailing Address 1023 31st St NW FI 5		FEC Identification Number <b>C</b> Transaction ID : <b>VVBANAQRZ</b> Amount of Each Disbursement this Period 33400.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Polling	Zip Code 20007-4458	FEC Identification Number <b>C</b> Transaction ID : <b>VVBANAQTI</b> Amount of Each Disbursement this Period 3048.73 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
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>C. Trilogy Interactive, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address PO Box 4177		FEC Identification Number <b>C</b> Transaction ID : <b>VVBANAQTI</b> Amount of Each Disbursement this Period 3048.73 Non-Contribution Account <input type="checkbox"/> Memo Item
City Mountain View	State CA	
Purpose of Disbursement IE Not Yet Disseminated	Zip Code 94040-0177	FEC Identification Number <b>C</b> Transaction ID : <b>VVBANAQTI</b> Amount of Each Disbursement this Period 3048.73 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	77448.73
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. Trilogy Interactive, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021	
Mailing Address PO Box 4177		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQTT</b> Amount of Each Disbursement this Period [ ] 56908.00 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Mountain View	State CA	Zip Code 94040-0177	Category/ Type [ ]
Purpose of Disbursement IE Not Yet Disseminated		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:			

Full Name (Last, First, Middle Initial) <b>B. Trilogy Interactive, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021	
Mailing Address PO Box 4177		FEC Identification Number C [ ] <b>Transaction ID : VVBANAQTV</b> Amount of Each Disbursement this Period [ ] 6500.00 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Mountain View	State CA	Zip Code 94040-0177	Category/ Type [ ]
Purpose of Disbursement IE Not Yet Disseminated		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:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ] Memo Item <input type="checkbox"/>	
City	State	Zip Code	Category/ Type [ ]
Purpose of Disbursement		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	63408.00
<b>TOTAL</b> This Period (last page this line number only).....▶	340991.67

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 104 OF 110
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**DMFI PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Democratic Majority for Israel</b>			Nature of Debt (Purpose): Staff Salaries, Rent, List Acquisition, and Fundraising Expenses
Mailing Address 1023 31st St NW Ste 530			
City Washington	State DC	Zip Code 20007-4458	

Outstanding Balance Beginning This Period		Transaction ID : <b>VV9C59HD6C1</b>	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
41141.20	0.00	41141.20	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	41141.20
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	41141.20
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	41141.20



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Dover Strategy Group, Inc.
Mailing Address 823 N 25th St
City Philadelphia State PA Zip Code 19130-1818
Purpose of Expenditure Actual Cost of Direct Mail Services as Disclosed on 7/12/21 48-Hour Report
Category/Type 004
Name of Federal Candidate: TURNER, NINA, , ,
Office Sought: House District: 11 State: OH
Disbursement For: Other (specify) Special Primary
Amount 52425.85
Transaction ID : VVBANAQSTP6
Date of Disbursement or Obligation 07 / 12 / 2021

Full Name of Payee Dover Strategy Group, Inc.
Mailing Address 823 N 25th St
City Philadelphia State PA Zip Code 19130-1818
Purpose of Expenditure Actual Cost of Direct Mail Services as Disclosed on 7/15/21 48-Hour Report
Category/Type 004
Name of Federal Candidate: TURNER, NINA, , ,
Office Sought: House District: 11 State: OH
Disbursement For: Other (specify) Special Primary
Amount 51044.95
Transaction ID : VVBANAQTDF2
Date of Disbursement or Obligation 07 / 12 / 2021

(a) SUBTOTAL of Itemized Independent Expenditures 103470.80
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mellman, Mark, , ,

[Electronically Filed]

Date 07 / 21 / 2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Sage Media Planning & Placement, Inc.
Mailing Address 1322 G St SE
City Washington State DC Zip Code 20003-3021
Purpose of Expenditure TV Advertising Buy - Estimated Cost
Category/Type 004
Date of Public Distribution/Dissemination 06/30/2021
Amount 164997.03
Transaction ID : VVBANAQS0PO
Date of Disbursement or Obligation 06/29/2021

Name of Federal Candidate: BROWN, M SHONTEL, ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 714297.41
Disbursement For: Other (specify) Special Primary

Full Name of Payee Sage Media Planning & Placement, Inc.
Mailing Address 1322 G St SE
City Washington State DC Zip Code 20003-3021
Purpose of Expenditure TV Advertising Buy - Estimated Cost
Category/Type 004
Date of Public Distribution/Dissemination 07/07/2021
Amount 85736.40
Transaction ID : VVBANAQSD21
Date of Disbursement or Obligation 06/29/2021

Name of Federal Candidate: TURNER, NINA, ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 714297.41
Disbursement For: Other (specify) Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures 250733.43
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mellman, Mark, ,

[Electronically Filed]

Date 07/21/2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Sage Media Planning & Placement, Inc.
Mailing Address 1322 G St SE
City Washington State DC Zip Code 20003-3021
Purpose of Expenditure TV Advertising Buy - Estimated Cost
Category/Type 004
Date of Public Distribution/Dissemination 07/07/2021
Amount 249198.00
Transaction ID : VVBANAQSD05
Date of Disbursement or Obligation 07/06/2021

Name of Federal Candidate: TURNER, NINA, ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 714297.41
Disbursement For: Other (specify) Special Primary

Full Name of Payee Sena Kozar Strategies
Mailing Address 3723 Jenifer St NW
City Washington State DC Zip Code 20015-1805
Purpose of Expenditure Actual Cost of TV Advertising Production as Disclosed on 7/8/21 48-Hour Report
Category/Type 004
Date of Public Distribution/Dissemination 06/30/2021
Amount 14250.80
Transaction ID : VVBANAQS277
Date of Disbursement or Obligation 06/30/2021

Name of Federal Candidate: BROWN, M SHONTEL, ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 714297.41
Disbursement For: Other (specify) Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures 263448.80
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mellman, Mark, , [Electronically Filed] Date 07/21/2021
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Sena Kozar Strategies
Mailing Address 3723 Jenifer St NW
City Washington State DC Zip Code 20015-1805
Purpose of Expenditure Actual Cost of TV Advertising Production as Disclosed on 7/9/21 48-Hour Report
Category/Type 004
Name of Federal Candidate: TURNER, NINA, , ,
Office Sought: House District: 11 State: OH
Disbursement For: Other (specify) Special Primary

Full Name of Payee Trilogy Interactive, LLC
Mailing Address PO Box 4177
City Mountain View State CA Zip Code 94040-0177
Purpose of Expenditure Digital Advertising Buy & Production - Estimated Cost
Category/Type 004
Name of Federal Candidate: BROWN, M SHONTEL, , ,
Office Sought: House District: 11 State: OH
Disbursement For: Other (specify) Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures 24210.11
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mellman, Mark, ,

[Electronically Filed]

Date 07 / 21 / 2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Trilog Interactive, LLC
Mailing Address PO Box 4177
City Mountain View State CA Zip Code 94040-0177
Purpose of Expenditure Actual Cost of Digital Advertising Buy as Disclosed on 7/8/21
Category/Type 004
Date of Public Distribution/Dissemination 07/01/2021
Amount 1951.27
Transaction ID : VVBANAQS4C1
Date of Disbursement or Obligation 06/30/2021

Name of Federal Candidate: BROWN, M SHONTEL, ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 714297.41
Disbursement For: Other (specify) Special Primary

Full Name of Payee Trilog Interactive, LLC
Mailing Address PO Box 4177
City Mountain View State CA Zip Code 94040-0177
Purpose of Expenditure Digital Advertising Buy & Production - Estimated Cost
Category/Type 004
Date of Public Distribution/Dissemination 07/07/2021
Amount 63908.00
Transaction ID : VVBANAQSNW2
Date of Disbursement or Obligation 06/30/2021

Name of Federal Candidate: TURNER, NINA, ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 714297.41
Disbursement For: Other (specify) Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures 65859.27
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mellman, Mark, ,

[Electronically Filed]

Date 07/21/2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Trilog Interactive, LLC
Mailing Address PO Box 4177
City Mountain View State CA Zip Code 94040-0177
Purpose of Expenditure Digital Advertising Buy - Estimated Cost
Category/Type 004
Date of Public Distribution/Dissemination 07/08/2021
Amount 6000.00
Transaction ID : VVBANAQSTM0
Date of Disbursement or Obligation 06/30/2021

Name of Federal Candidate: BROWN, M SHONTEL, , ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 714297.41
Disbursement For: Other (specify) Special Primary

Full Name of Payee Trilog Interactive, LLC
Mailing Address PO Box 4177
City Mountain View State CA Zip Code 94040-0177
Purpose of Expenditure Digital Advertising Production - Estimated Cost
Category/Type 004
Date of Public Distribution/Dissemination 07/01/2021
Amount 575.00
Transaction ID : VVBANAQS4D8
Date of Disbursement or Obligation 07/01/2021

Name of Federal Candidate: BROWN, M SHONTEL, , ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 714297.41
Disbursement For: Other (specify) Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures 6575.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 714297.41

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mellman, Mark, , ,

[Electronically Filed]

Date 07/21/2021

Signature