

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 CAE (US) Inc. PAC

ADDRESS (number and street) 4908 Tampa West Blvd Tampa FL 33634-2411 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00764480 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 02 / 15 / 2024 through 03 / 31 / 2024

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

Signature of Treasurer Rocheleau, Benoit, , , Date 04 / 15 / 2024

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

CAE (US) Inc. 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="2024"/>		<input type="text" value="94807.02"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="97273.79"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4391.77"/>	<input type="text" value="8908.54"/>
(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="101665.56"/>	<input type="text" value="103715.56"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3100.00"/>	<input type="text" value="5150.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="98565.56"/>	<input type="text" value="98565.56"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CAE (US) Inc. PAC

Report Covering the Period: From: 02 / 15 / 2024 To: 03 / 31 / 2024

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).....	3119.20	4773.00
(ii) Unitemized	1272.57	4135.54
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4391.77	8908.54
(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)	4391.77	8908.54
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4391.77	8908.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4391.77	8908.54

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	100.00	150.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	100.00	150.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3100.00	5150.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3100.00	5150.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4391.77	8908.54
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4391.77	8908.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	100.00	150.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	100.00	150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 OF 15	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
CAE (US) Inc. PAC

A. Caralle, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 Arlington Downs Road
 City Arlington State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Manager Project / Program Manager
 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
 03 / 08 / 2024
Transaction ID : A2024-357955
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Caralle, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 Arlington Downs Road
 City Arlington State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Manager Project / Program Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2024
Transaction ID : A2024-511940
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Collen, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 Arlington Downs Road
 City Arlington State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Director Hardware Engineering and Dep
 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
 03 / 08 / 2024
Transaction ID : A2024-357953
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<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)
CAE (US) Inc. PAC

A. Collen, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 Arlington Downs Road
 City Arlington State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Director Hardware Engineering and Dep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 22 / 2024**
Transaction ID : A2024-511953
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Geoffroy, Eric, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4908 Tampa West Blvd
 City Tampa State FL Zip Code 33634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Director Project / Program Managemen
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **02 / 23 / 2024**
Transaction ID : A2024-317632
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Geoffroy, Eric, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4908 Tampa West Blvd
 City Tampa State FL Zip Code 33634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Director Project / Program Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **03 / 08 / 2024**
Transaction ID : A2024-357966
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<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)
CAE (US) Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Geoffroy, Eric, , ,		Date of Receipt MM / DD / YYYY 03 / 22 / 2024 Transaction ID : A2024-511965
Mailing Address 4908 Tampa West Blvd		Amount of Each Receipt this Period 100.00
City Tampa	State FL	Zip Code 33634
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) Director Project / Program Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Graves, Sarah, , ,		Date of Receipt MM / DD / YYYY 02 / 23 / 2024 Transaction ID : A2024-317630
Mailing Address 4908 Tampa West Blvd		Amount of Each Receipt this Period 192.30
City Tampa	State FL	Zip Code 33634
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) General Counsel Defense & Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Graves, Sarah, , ,		Date of Receipt MM / DD / YYYY 03 / 08 / 2024 Transaction ID : A2024-357962
Mailing Address 4908 Tampa West Blvd		Amount of Each Receipt this Period 192.30
City Tampa	State FL	Zip Code 33634
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) General Counsel Defense & Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 961.50	

SUBTOTAL of Receipts This Page (optional).....▶	484.60
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
	<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)
CAE (US) Inc. PAC

A. Graves, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4908 Tampa West Blvd
 City Tampa State FL Zip Code 33634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) General Counsel Defense & Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1153.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2024
Transaction ID : A2024-511964
 Amount of Each Receipt this Period
 192.30
 Memo Item

B. Holdorf, Marissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4840 Westfields Blvd. Suite 300
 City Chantilly State VA Zip Code 20151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Vice President Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2024
Transaction ID : A2024-317635
 Amount of Each Receipt this Period
 192.30
 Memo Item

C. Holdorf, Marissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4840 Westfields Blvd. Suite 300
 City Chantilly State VA Zip Code 20151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Vice President Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2024
Transaction ID : A2024-357938
 Amount of Each Receipt this Period
 192.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	576.90
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
	<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)
CAE (US) Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Holdorf, Marissa, , ,			Date of Receipt MM / DD / YYYY 03 / 22 / 2024 Transaction ID : A2024-511946
Mailing Address 4840 Westfields Blvd. Suite 300			Amount of Each Receipt this Period 192.30
City Chantilly	State VA	Zip Code 20151	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) Vice President Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1153.80		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lucas, Scott, , ,			Date of Receipt MM / DD / YYYY 02 / 23 / 2024 Transaction ID : A2024-317653
Mailing Address 2200 Arlington Downs Road			Amount of Each Receipt this Period 150.00
City Arlington	State TX	Zip Code 76011	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) Director Project / Program Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lucas, Scott, , ,			Date of Receipt MM / DD / YYYY 03 / 08 / 2024 Transaction ID : A2024-357943
Mailing Address 2200 Arlington Downs Road			Amount of Each Receipt this Period 150.00
City Arlington	State TX	Zip Code 76011	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) Director Project / Program Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 750.00		

SUBTOTAL of Receipts This Page (optional).....▶	492.30
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 11 OF 15
	<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)
CAE (US) Inc. PAC

A. Lucas, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 Arlington Downs Road
 City Arlington State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Director Project / Program Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2024
Transaction ID : A2024-511960
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Luthy, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14250 Farnham Royal Ct
 City Colorado Springs State CO Zip Code 80908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Director Project / Program Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2024
Transaction ID : A2024-511959
 Amount of Each Receipt this Period
 38.50
 Memo Item

C. STANLEY, PATRICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 Yoakum Parkway Unit 1022
 City Alexandria State VA Zip Code 22304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Director Business Development
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2024
Transaction ID : A2024-317644
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	288.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 15
	<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)
CAE (US) Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STANLEY, PATRICE, , ,

Mailing Address 205 Yoakum Parkway Unit 1022

City Alexandria	State VA	Zip Code 22304
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) Director Business Development
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2024

Transaction ID : A2024-357937

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 205 Yoakum Parkway Unit 1022

City Alexandria	State VA	Zip Code 22304
--------------------	-------------	-------------------

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

Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) Director Business Development
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2024

Transaction ID : A2024-511931

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Stoddard, Merrill, , ,

Mailing Address 568 W. Threshing Way Ct

City Kaysville	State UT	Zip Code 84037
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) Vice President & General Manager Solu
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
769.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2024

Transaction ID : A2024-317631

Amount of Each Receipt this Period
192.30

Memo Item

SUBTOTAL of Receipts This Page (optional).....	392.30
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 13 OF 15
	<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)
CAE (US) Inc. PAC

A. Stoddard, Merrill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 568 W. Threshing Way Ct
 City Kaysville State UT Zip Code 84037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Vice President & General Manager Sol
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2024
Transaction ID : A2024-357961
 Amount of Each Receipt this Period
 192.30
 Memo Item

B. Stoddard, Merrill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 568 W. Threshing Way Ct
 City Kaysville State UT Zip Code 84037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Vice President & General Manager Sol
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1153.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2024
Transaction ID : A2024-511963
 Amount of Each Receipt this Period
 192.30
 Memo Item

C. Stough, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4908 Tampa West Blvd
 City Tampa State FL Zip Code 33634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE (US) Inc. Occupation (for Individual) Director Communications
 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
 03 / 08 / 2024
Transaction ID : A2024-357930
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	434.60
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 15
(check only one)

<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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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)
CAE (US) Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stough, Wendy, , ,

Mailing Address 4908 Tampa West Blvd

City Tampa	State FL	Zip Code 33634
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAE (US) Inc.	Occupation (for Individual) Director Communications
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	22	/	2024

Transaction ID : A2024-511930

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	3119.20

**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)
CAE (US) Inc. PAC

Full Name (Last, First, Middle Initial) A. McClellan for Congress			Date of Disbursement MM / DD / YYYY 03 / 14 / 2024	
Mailing Address PO Box 818			FEC Identification Number C00829812 Transaction ID : B867296	
City Richmond	State VA	Zip Code 23218	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type 011	Memo Item <input type="checkbox"/>	
Candidate Name McClellan, Jennifer, , ,		Disbursement For: 2024		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: VA	District: 04			

Full Name (Last, First, Middle Initial) B. Families for James Lankford			Date of Disbursement MM / DD / YYYY 03 / 26 / 2024	
Mailing Address PO Box 1639			FEC Identification Number C00466482 Transaction ID : B867675	
City Bethany	State OK	Zip Code 73008	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type 011	Memo Item <input type="checkbox"/>	
Candidate Name Lankford, James, , ,		Disbursement For: 2028		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: OK	District:			

Full Name (Last, First, Middle Initial) C. Hern For Congress			Date of Disbursement MM / DD / YYYY 03 / 26 / 2024	
Mailing Address 9521-B Riverside Pkwy #350			FEC Identification Number C00636092 Transaction ID : B867676	
City Tulsa	State OK	Zip Code 74137	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type 011	Memo Item <input type="checkbox"/>	
Candidate Name Hern, Kevin, R, ,		Disbursement For: 2024		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: OK	District: 01			

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

3000.00

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

3000.00