PAGE 1 / 17

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or other man Ar	Additionized oc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example over the	e: If typing, type lines.	12FE4M5	5
ESAFund					
ADDRESS (number and street)	610 S. Boulevard				
▼ Check if different					
than previously reported. (ACC)	Tampa			FL L	33606
2. FEC IDENTIFICATION NU	JMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00489856		3. IS THIS REPORT	NEW (N) OR		ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (Ms		Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6		Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	Jul 20 (M7)	Oct 2	0 (M10) Jan 31 (YE)
Quarterly Report (C July 15 Quarterly Report (C	(c) 12-Day		nary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (C	Report for	the: Con	vention (12C)	Special (1	2S)
January 31 Year-End Report (Y		Election on	M / D D /	Y I Y I Y I Y	in the State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	(d) 30-Day		eral (30G)	Runoff (30	DR) Special (30S)
Termination Report (TER)		М	11 08	2022	in the State of
5. Covering Period 10		y y y 2022 th	nrough 11	28	2022
I certify that I have examined th	is Report and to the b	est of my knowled	ge and belief it is	true, correct and	complete.
Type or Print Name of Treasure	Watkins, Nancy H., ,	,			
Signature of Treasurer	ins, Nancy H., , ,	[Elec	ctronically Filed]	Date 12	08 / 2022
NOTE: Submission of false, erron	eous, or incomplete info	rmation may subject	the person signing	this Report to the	e penalties of 52 U.S.C. § 30109
Office Use					FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name **ESAFund** 10 20 2022 11 28 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 71272.72 January 1, 2022 (b) Cash on Hand at 14978.79 Beginning of Reporting Period..... 2625000.00 2625000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 2696272.72 2639978.79 6(a) and 6(c) for Column B)..... 2601424.65 2657718.58 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 38554.14 38554.14 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

-ederal Election Commissio999 E Street, NWWashington, DC 20463

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

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)......▶

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)	or Hecelpts	Page 3
Write or Type Committee Name		
ESAFund		
Report Covering the Period: From:	10 20 / Y 2022 To	: 11 28 2022
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	2200000.00	2200000.00
(i) Itemized (use Schedule A)		220000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	2200000.00	2200000.00
4) 5 5 5 6 5 6	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	4 4
(such as PACs)	425000.00	425000.00
(d) Total Contributions (add Lines	7 7	
11(a)(iii), (b), and (c)) (Carry		0005000.00
Totals to Line 33, page 5)	2625000.00	2625000.00
12. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	4 4
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
to Federal Candidates and Other		
Political Committees	. 0.00	0.00
17. Other Federal Receipts		
(Dividends, Interest, etc.)		0.00
 Transfers from Non-Federal and Levin Full (a) Non-Federal Account 	nds	
(from Schedule H3)	0.00	0.00
(4 4	4 4
(b) Levin Funds (from Schedule H5)	0.00	0.00
(-,	4 4	4 4
(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))	2625000.00	2625000.00

2625000.00

2625000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schodule III)		Carolinai Ioai to Pato		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00		
(i) Tederal Strate	45 45	1 1 1 1 1 1 1 1		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	870.00	7163.93		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	870.00	7163.93		
. Transfers to Affiliated/Other Party	47 47 47			
Committees Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	175000.00	225000.00		
Independent Expenditures (use Schedule E)	2425554.65	2425554.65		
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4	2423334.03		
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	45 45	4 1 4		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds		4 4 4		
(add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
Federal Election Activity (52 U.S.C. § 30101(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	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2601424.65	2657718.58		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	2601424.65	2657718.58		
· L	200.12.100	2031/10.30		

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	2625000.00	2625000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2625000.00	2625000.00
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	870.00	7163.93
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	870.00	7163.93

SCHEDULE A (FEC Form 3X)

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

Use separate schedule(s)

F	FOR LINE NUMBER:			PAGE		6	OF	17		
(check only one)										
	X	11a		11b		11c		12		
		13		14		15		16	;	17

ITEMIZED RECEIPTS for each category of the Detailed Summary Page 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) **ESAFund** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ricketts, Marlene, , , Date of Receipt Mailing Address 412 N. Elmwood Road 2022 21 City Zip Code State Transaction ID: SA11AI.7968 NE Omaha 68132 Amount of Each Receipt this Period FEC ID number of contributing C 2200000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) n/a retired Receipt For: Aggregate Year-to-Date ▼ Primary General 2200000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2200000.00 SUBTOTAL of Receipts This Page (optional)..... 2200000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 17 (check only one) 11a 11b
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) ESAFund			
Full Name of Individual (Last, First, Middle In Restoration PAC Mailing Address 1901 Butterfield Road Suite 1120 City Downers Grove FEC ID number of contributing federal political committee.	State IL C C0	Zip Code 60515	Date of Receipt 10 21 2022 Transaction ID: SA11C.7972 Amount of Each Receipt this Period 425000.00
Name of Employer (for Individual) Receipt For: Primary General Other (specify) ▼		upation (for Individual) Year-to-Date ▼ 425000.00	Memo Item
Full Name of Individual (Last, First, Middle In B. Mailing Address			Date of Receipt
FEC ID number of contributing federal political committee.	State	Zip Code	Amount of Each Receipt this Period
Name of Employer (for Individual) Receipt For: Primary General Other (specify) ▼		rupation (for Individual) Year-to-Date ▼	Memo Item
Full Name of Individual (Last, First, Middle In	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address City	State	Zip Code	M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	1		425000.00

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

425000.00

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) ESAFund Full Name (Last, First, Middle Initial) A. Dickinson Wright PLLC Mailing Address 2600 W. Big Beaver Suite 300 City Troy State Zip Code MI 48084 Purpose of Disbursement legal fees Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Category/ Type Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Amount of Each Disbursement this Period Transaction ID: SB21B.8011 Transa	SCHEDULE B (FEC Form 3X)			FOR LINE	PAGE	8 OF	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. NAME OF COMMITTEE (In Full) ESAFund Full Name (Last, First, Middle Initial) A. Dickinson Wright PLLC Mailing Address 2800 W. Big Beaver Suite 300 City State Zip Code Mil 48064 Purpose of Disbursement legal fees Candidate Name Candidate Name Category/ Type FEC Identification Number Category/ Type FEC Identification Number Full Name (Last, First, Middle Initial) B. Date of Disbursement Initial Disbursement Candidate Name Category/ Type FEC Identification Number Full Name (Last, First, Middle Initial) B. Date of Disbursement Candidate Name Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Candidate Name Category/ Type FEC Identification Number Category/ Type FEC Identification N]		
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State: District: Other (specify) Date of Disbursement Mailing Address City State Zip Code FEC Identification Number Candidate Name Candidate Name Candidate Name Disbursement For: Senate Primary General Other (specify) State: District: Substoctable Primary General Other (specify) State: District: Memo Item 870.00			Gonoral			7	7	1 785	ш.
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City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Subtrotal of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			· · · · · · · · · · · · · · · · · ·		Mem	o Item			
Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substotal of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial)								
City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	C.				Date of D	Disbursemer	nt		
City Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Substate Zip Code FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item 870.00	-				M = M	/ D D	/ Y Y	YY	1
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substitute of Disbursements This Page (optional)	Mailing Address								1
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substitute of Disbursements This Page (optional)	City	State	Zip Code		FE0	AMELIA AMELIA			
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Substrict: Memo Item 870.00					FEC Ider	urication Nu	ırnber	_	
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Purpose of Disbursement								
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substrict: Memo Item 870.00	Condidata Nama								
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Candidate Name				Amount o	of Each Dist	oursement	this Per	riod
Senate Primary General Other (specify) ▼ State: District: Memo Item 870.00	Office Sought: House Dishur	sement For		туре	1				
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)			General			7	7	- 40	_
State: District: SUBTOTAL of Disbursements This Page (optional)	President	Other (spe	ecify) 🔻		Mem	o Item			
OZZO OO	State: District:					- 1.0111			_
OZZO OO								070.00	可
TOTAL This Period (last page this line number only)	SUBTOTAL of Disbursements This Page (optional	l)		·····•		7	7	870.00	
	TOTAL This Period (last nage this line number of	nlv)		_				870.00	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 17				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	7 one) 22 X 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full)	ne and address of any point	our committee te	conor contributions from such committee.			
ESAFund						
Full Name (Last, First, Middle Initial)			Data of Biologopassas			
Evergreen Principles PAC			Date of Disbursement			
Mailing Address 1206 N. Landing Way, #1135			10 21 2022			
City Renton	State Zip Code WA 98057		FEC Identification Number			
Purpose of Disbursement	30001		C C00819664			
contribution			Transaction ID : SB23.7970			
Candidate Name		Category/	Amount of Each Disbursement this Period			
200		Type				
	ment For:		175000.00			
Senate President	Primary General Other (specify) ▼					
State: District:	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)						
3.			Date of Disbursement			
			M M / D D / Y Y Y Y			
Mailing Address						
City	State Zip Code		FEC Identification Number			
Purpose of Disbursement			C			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:	A1				
Senate	Primary General		7 7 4			
President State: District:	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)			Date of Disbursement			
			M = M / D = D / Y = Y = Y			
Mailing Address						
City	State Zip Code		FEC Identification Number			
Purpose of Disbursement			C			
Candidate Name	Amount of Each Disbursement this Period					
Office Sought: House Disburser	ment For:	Type				
Senate	Primary General		7 7 4			
President	Other (specify) ▼		Memo Item			
State: District:			L			
SUBTOTAL of Disbursements This Page (optional)			175000.00			
3. (4. [7 7 7			
TOTAL This Period (last page this line number only))		175000.00			

TEMIZED INDEPENDENT EXPENDITURES				PAGE 10 OF 17 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
ESAFund				C C00489856
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item D	Date of Public Distribution/Dissemination
CampaignHQ				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1093 W. Front Street				10 28 2022 mount
P.O. Box 257	State	Zip Code		22500.00
City Brooklyn	IA	55211		Transaction ID : SE.7991
Purpose of Expenditure	.,,			Date of Disbursement or Obligation
voter contact/messaging services		Category/ Type		10 28 7 2022
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
Murray, Patty, , ,		x Oppose	Pi	resident X Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	803506.74	Disburse 2022	ement For: Primary General
Full Name of Payee	,	Memo	Itam [Other (specify) ►
CampaignHQ		□ INTELLIO	item E	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1093 W. Front Street				10 20 2022
P.O. Box 257			A	mount
City	State	Zip Code		22500.00
Brooklyn	IA	55211		Transaction ID : SE.7992 Date of Disbursement or Obligation
Purpose of Expenditure voter contact/messaging services		Category/ Type		10 28 7 2022
Name of Federal Candidate:		x Support	Office S	Sought: House District: 00
Smiley, Tiffany, , ,		Oppose	Pi	resident X Senate State: WA
Calendar Year-To-Date Per Election for Office Sought		826006.74	Disburse	ement For: Primary General
	7		L	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				45000.00
			-	
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Watkins, Nancy H., , ,	Electronically Fil	led]	M = M	08 2022
Signature		Date	e 12	2022

TEMIZED INDEPENDENT EXPENDITURES				PAGE 11 OF 17 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
ESAFund						
				C C00489856		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y		
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination		
CampaignHQ				11 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1093 W. Front Street			An	nount		
P.O. Box 257	I -	1				
City	State	Zip Code	ļĻ	49999.00		
Brooklyn	IA	55211		ansaction ID : SE.8004 te of Disbursement or Obligation		
Purpose of Expenditure voter contact/messaging services		Category/ Type		11 01 2022		
Name of Federal Candidate:		X Support	Office So	ught: House District: 00		
Smiley, Tiffany, , ,		Oppose	Pre	esident Senate State: WA		
Calendar Year-To-Date Per Election for Office Sought		876005.74	Disburser			
				Other (specify)		
Full Name of Payee CampaignHQ		Memo	Item Da	te of Public Distribution/Dissemination		
, ,				11 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1093 W. Front Street			An	nount		
P.O. Box 257	Τ_	I				
City	State	Zip Code		10773.68 ransaction ID : SE.8014		
Brooklyn	IA	55211		te of Disbursement or Obligation		
Purpose of Expenditure voter contact/messaging services		Category/ Type		11 08 2022		
Name of Federal Candidate:		✗ Support	Office So	ught: House District: 00		
Smiley, Tiffany, , ,		Oppose	Pre	sident Senate State: WA		
Calendar Year-To-Date		inima'ra'	Disburser	ment For: Primary 🗶 General		
Per Election for Office Sought	7-1-1-5-	921779.42	2022	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			• [60772.68		
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	, , , , , , , , , , , , , , , , , , , ,		
(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.						
Watkins, Nancy H., , ,	Electronically Fil	led]	M = M	/ D D / Y Y Y Y Y		
Signature	ыссионициу Ги	Date	12	08 2022		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 12 OF 17
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
ESAFund				C C00489856
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y
Full Name of Payee Impact Advertising, LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				10 27 2022
3685 S 500 W				Amount
City	State	Zip Code		75000.00
Salt Lake City	UT	84115		Transaction ID : SE.7979 Date of Disbursement or Obligation
Purpose of Expenditure digital advertising		Category/ Type		10 27 / 2022
Name of Federal Candidate:		Support	Office	Sought: X House District: 03
Scholten, Hillary, , ,		× Oppose	l	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		600000.00	Disbur 2022	rsement For: Primary X General
Fel Election for Office Sought	7 7		2022	Other (specify) ▶
Full Name of Payee Impact Advertising, LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
,				10 27 2022
Mailing Address 3685 S 500 W				Amount
City	State	Zip Code		92100.00
Salt Lake City	UT	84115		Transaction ID : SE.7989 Date of Disbursement or Obligation
Purpose of Expenditure digital advertising		Category/ Type		10 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 00
Murray, Patty, , ,		x Oppose		President Senate State: WA
Calendar Year-To-Date		682100.00		rsement For: Primary 🗶 General
Per Election for Office Sought	7	002100.00	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	167100.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(,,				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Watkins, Nancy H., , ,	Electronically Fil	[ed] Date	e 12	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	<u>-</u>	_ Date	12	

TEMIZED INDEPENDENT EXPENDITORES				PAGE 13 OF 17 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
ESAFund				C C00489856
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Impact Advertising, LLC				10 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3685 S 500 W				Amount
City	State	Zip Code		61400.00
Salt Lake City	UT	84115		Transaction ID : SE.7990 Date of Disbursement or Obligation
Purpose of Expenditure digital advertising		Category/ Type		M M / D D / Y Y Y Y Y Y Y 2022
Name of Federal Candidate:		✗ Support	Office	Sought: House District: 00
Smiley, Tiffany, , ,		Oppose		President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought		743500.00	Disbu 2022	rsement For: Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Impact Advertising, LLC				11 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3685 S 500 W				Amount
City	State	Zip Code		17500.00
Salt Lake City	UT	84115		Transaction ID : SE.8005 Date of Disbursement or Obligation
Purpose of Expenditure digital advertising		Category/ Type		M 11 / 04 / Y Y Y Y Y 2022
Name of Federal Candidate:		x Support	Office	Sought: House District: 00
Smiley, Tiffany, , ,		Oppose		President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	893505.74	Disbu 2022	rsement For: Primary
(a) CURTOTAL of Naminal Indonesia of Funancia				70000 00
(a) SUBTOTAL of Itemized Independent Expenditures			• •	78900.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es			
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Watkins, Nancy H., , ,	Electronically File	ed]	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 12	2 08 2022

TEMIZED INDEFENDENT EXPENDITORES	3			PAGE 14 OF 17 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼	
ESAFund			l r	C C00489856	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y	
Full Name of Payee Impact Advertising, LLC	М_				
Mailing Address 3685 S 500 W			Amount	1 04 2022	
City	State	Zin Codo		17500.00	
City Salt Lake City	UT	Zip Code 84115		etion ID : SE.8006 Disbursement or Obligation	
Purpose of Expenditure digital advertising		Category/ Type	11 04 2022		
Name of Federal Candidate:		Support	Office Sought:	House District:00	
Murray, Patty, , ,		x Oppose	Presiden	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	911005.74	Disbursement I 2022 Oth	For: Primary X General er (specify) ▶	
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination	
McCarthy Hennings Media, Inc.			M 1		
Mailing Address 1850 M Street, N.W., #235			Amount		
City	State	Zip Code	─ [:	18775.23	
Washington	DC	20004		ction ID : SE.7977 Disbursement or Obligation	
Purpose of Expenditure media production		Category/ Type	1	0 28 2022	
Name of Federal Candidate:		Support	Office Sought:	₩ House District:03	
Scholten, Hillary, , ,		x Oppose	Presiden	t Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought	7	618775.23	Disbursement I 2022 Oth	For: Primary X General er (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditure	9S		.	36275.23	
(b) SUBTOTAL of Unitemized Independent Expendit	tures		· []	7	
(c) TOTAL Independent Expenditures			·	7 1 7 1 7 1	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candi- party committee) any political party committee or it	date or authorized	•		•	
Watkins, Nancy H., , ,	[Electronically File	ed] Date	40	08 2022	
Signature					

TEMIZED INDEPENDENT EXPENDITURES				PAGE 15 OF 17		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X		
ESAFund				FEC IDENTIFICATION NUMBER ▼ C C00489856		
				C C00409030		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y		
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination		
McCarthy Hennings Media, Inc.		10 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 1850 M Street, N.W., #235						
		,	A	mount		
City	State	Zip Code		11272.13		
Washington	DC	20004		ransaction ID : SE.7986 ate of Disbursement or Obligation		
Purpose of Expenditure media production		Category/ Type		10 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office S	ought: House District: 00		
Murray, Patty, , ,		x Oppose	Pr	esident Senate State: WA		
Calendar Year-To-Date				ement For: Primary Seneral		
Per Election for Office Sought	-	754772.13	2022	Other (specify) ▶		
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination		
McCarthy Hennings Media, Inc.				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1850 M Street, N.W., #235						
			A	mount		
City	State	Zip Code		11272.13		
Washington	DC	20004		Transaction ID : SE.7987 Date of Disbursement or Obligation		
Purpose of Expenditure media production	Category/			10 28 2022		
		Type		10 20 2022		
Name of Federal Candidate:		✗ Support	Office S			
Smiley, Tiffany, , ,		Oppose	Pr	esident Senate State: WA		
Calendar Year-To-Date Per Election for Office Sought		766044.26	Disburse	ement For: Primary X General		
Per Election for Office Sought	7 7		2022	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	i		▶	22544.26		
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. г			
(b) 00010 TAE of Officering 200 macportations Exportation						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
party committee, any pointed party committee or ne	agont.					
Watkins, Nancy H., , ,	[Electronically Fil	led1 Day	M = M	08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature	,	Date	e 12	08 2022		

FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ **ESAFund** C00489856 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee McCarthy Hennings Media, Inc. 28 2022 Mailing Address 1850 M Street, N.W., #235 Amount State Zip Code 14962.48 City DC 20004 Transaction ID: SE.7988 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ media production 10 28 2022 Type Name of Federal Candidate: 00 Support Office Sought: House District: Murray, Patty, , , Oppose WA President **x** Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 781006.74 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Mentzer Media Services, Inc. 2022 27 10 Mailing Address 600 Fairmount Avenue, #306 Amount City State Zip Code 525000.00 Towson Transaction ID: SE.7978 MD 21286 Date of Disbursement or Obligation Purpose of Expenditure Category/ media placement 25 2022 10 Type Name of Federal Candidate: 03 Support Office Sought: **X** House District: Scholten, Hillary, , , MΙ Oppose President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 525000.00 2022 Per Election for Office Sought Other (specify) ▶ 539962.48 (a) SUBTOTAL of Itemized Independent Expenditures (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. Watkins, Nancy H., , , [Electronically Filed] 80 2022 Date Signature

PAGE

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OF

17

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 17 OF 17 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼		
ESAFund			and the second	C C00489856		
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y		
Full Name of Payee Mentzer Media Services, Inc.		☐ Memo	Item Date of	Public Distribution/Dissemination		
Mailing Address 600 Fairmount Avenue, #306	1					
			Amount			
City	State	Zip Code		885000.00		
Towson	MD	21286		ction ID: SE.7984 Disbursement or Obligation		
Purpose of Expenditure media placement		Category/ Type	M			
Name of Federal Candidate:		Support	Office Sought:	House District:03		
Murray, Patty, , ,		Coppose Support	Presiden	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
		A opposi	Disbursement			
Calendar Year-To-Date Per Election for Office Sought	7	885000.00	2022	For:		
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination		
Mentzer Media Services, Inc.			М			
Mailing Address			L	0 27 2022		
600 Fairmount Avenue, #306			Amount			
City	State	Zip Code	— Г	590000.00		
Towson	MD	21286	Transa	Transaction ID : SE.7985		
Purpose of Expenditure	IVID	21200	Date of	Disbursement or Obligation		
media placement		Category/ Type	1	0 25 7 2022		
Name of Federal Candidate:		x Support	Office Sought:	House District: 00		
Smiley, Tiffany, , ,		Oppose	Presiden			
Calendar Year-To-Date Per Election for Office Sought		590000.00	Disbursement 2022			
	7		Oth	er (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			.	1475000.00		
(h) CUDTOTAL of Unitersized Index and out Fune additu			_			
(b) SUBTOTAL of Unitemized Independent Expenditu	res		·	7		
(c) TOTAL Independent Expenditures			·	2425554.65		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
Watkins, Nancy H., , ,	[Electronically Fi	led] Doto	M = M /	08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		