

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**
FIX WASHINGTON PAC

ADDRESS (number and street) **421 OFFICE PARK DR**
 Check if different than previously reported. (ACC) **MOUNTAIN BROOK AL 35223**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00870592 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 **11 / 05 / 2024** in the State of **AL**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **/ /** in the State of

5. Covering Period **10 / 01 / 2024** through **10 / 16 / 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 **FISHER, JEDIDIAH, , ,**

Signature of Treasurer **FISHER, JEDIDIAH, , ,** Date **10 / 24 / 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

Write or Type Committee Name

FIX WASHINGTON PAC

Report Covering the Period: From: 10 / 01 / 2024 To: 10 / 16 / 2024

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: (a) Cash on Hand January 1, 2024 (0.00); (b) Cash on Hand at Beginning of Reporting Period (2012066.53); (c) Total Receipts (from Line 19) (3430000.00); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (5442066.53); 7. Total Disbursements (from Line 31) (2460736.63); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (2981329.90); 9. Debts and Obligations Owed TO the Committee (0.00); 10. Debts and Obligations Owed BY the Committee (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

FIX WASHINGTON PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2024 To: M M / D D / Y Y Y Y 10 / 16 / 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).....	1530000.00	13328880.58
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1530000.00	13328880.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1900000.00	2525000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3430000.00	15853880.58
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)).....▶	3430000.00	15853880.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3430000.00	15853880.58

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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	55411.50	378516.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	55411.50	378516.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	2405325.13	12494033.84
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)) ..	2460736.63	12872550.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2460736.63	12872550.68

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)	3430000.00	15853880.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3430000.00	15853880.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	55411.50	378516.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	55411.50	378516.84

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"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<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)
FIX WASHINGTON PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MIZEL, LARRY, A., ,

Mailing Address **4350 SOUTH MONACO STREET**

City DENVER	State CO	Zip Code 80237-3400
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) M.D.C. HOLDINGS	Occupation (for Individual) CEO
-------------------------------------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
10 / 16 / 2024

Transaction ID : SA11A.279398

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

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

Mailing Address **52 PORTLAND PL**

City SAINT LOUIS	State MO	Zip Code 63108-1242
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CIVIC SERVIA	Occupation (for Individual) CONSULTANT
----------------------------------------------------------	--------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 10 / 2024

Transaction ID : SA11A.272627

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

Mailing Address **PO BOX 1860**

City BENTONVILLE	State AR	Zip Code 72712-1860
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHILANTHROPIST
-----------------------------------------------------------	------------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500000.00

Date of Receipt
10 / 11 / 2024

Transaction ID : SA11A.272463

Amount of Each Receipt this Period
500000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	530000.00
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)
FIX WASHINGTON PAC

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

Mailing Address PO BOX 1860

City BENTONVILLE State AR Zip Code 72712-1860

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

Name of Employer (for Individual) ARVEST BANK Occupation (for Individual) BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500000.00

Date of Receipt
10 / 09 / 2024
Transaction ID : SA11A.271895

Amount of Each Receipt this Period
500000.00

Memo Item
CONTRIBUTION

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

Mailing Address PO BOX 1860

City BENTONVILLE State AR Zip Code 72712-1860

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500000.00

Date of Receipt
10 / 07 / 2024
Transaction ID : SA11A.271700

Amount of Each Receipt this Period
500000.00

Memo Item
CONTRIBUTION

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000000.00
TOTAL This Period (last page this line number only).....▶	1530000.00

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 8 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
FIX WASHINGTON PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CONSERVATIVE MAJORITY PROJECT SUPER PAC

Mailing Address **228 S WASHINGTON ST
STE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00884262**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400000.00

Date of Receipt
10 / 09 / 2024

Transaction ID : SA11C.275810

Amount of Each Receipt this Period
400000.00

Memo Item
CONTRIBUTION

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219-1891**

FEC ID number of contributing federal political committee. **C C00769232**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500000.00

Date of Receipt
10 / 01 / 2024

Transaction ID : SA11C.271276

Amount of Each Receipt this Period
500000.00

Memo Item
CONTRIBUTION

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

Mailing Address **2407 SE DELAWARE AVENUE #1156**

City **ANKENY** State **IA** Zip Code **50021-4470**

FEC ID number of contributing federal political committee. **C C00874370**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250000.00

Date of Receipt
10 / 16 / 2024

Transaction ID : SA11C.279397

Amount of Each Receipt this Period
250000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 15
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
FIX WASHINGTON PAC

A. NHA ACTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 OFFICE PARK DR

City MOUNTAIN BRK	State AL	Zip Code 35223-2411
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FEC ID number of contributing federal political committee. **C** C00876409

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2024

Transaction ID : SA11C.271275

Amount of Each Receipt this Period
250000.00

Memo Item
CONTRIBUTION

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

Mailing Address 421 OFFICE PARK DR

City MOUNTAIN BRK	State AL	Zip Code 35223-2411
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FEC ID number of contributing federal political committee. **C** C00876409

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2024

Transaction ID : SA11C.275809

Amount of Each Receipt this Period
500000.00

Memo Item
CONTRIBUTION

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)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750000.00
TOTAL This Period (last page this line number only).....▶	1900000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FIX WASHINGTON PAC

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2107

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2107

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2108

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

100.00

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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 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)
FIX WASHINGTON PAC

A. CHAIN BRIDGE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEES

Candidate Name

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

State: District:

Date of Disbursement: 10 / 15 / 2024

FEC Identification Number: C
Transaction ID : SB21B.I2108

Amount of Each Disbursement this Period: 25.00

Memo Item

B. CROSBY OTTENHOFF GOUP

Full Name (Last, First, Middle Initial)

Mailing Address 611 PENNSYLVANIA AVE SE STE 267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 10 / 07 / 2024

FEC Identification Number: C
Transaction ID : SB21B.I2108

Amount of Each Disbursement this Period: 4000.00

Memo Item

C. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 15405 JOHN MARSHALL HIGHWAY

City HAYMARKET State VA Zip Code 20169-3055

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 10 / 07 / 2024

FEC Identification Number: C
Transaction ID : SB21B.I2108

Amount of Each Disbursement this Period: 8677.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12702.50

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
FIX WASHINGTON PAC

Form A: LAURA GRALTON CONSULTING. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form B: SRCP MEDIA, INC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form C: SRCP MEDIA, INC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

SUBTOTAL of Disbursements This Page (optional) 19709.00
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)
FIX WASHINGTON PAC

A. TAG STRATEGIES

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1243

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 14 / 2024

FEC Identification Number: C

Transaction ID : SB21B.I2108

Amount of Each Disbursement this Period: 22900.00

Memo Item

B.

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	22900.00
TOTAL This Period (last page this line number only).....▶	55411.50

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FIX WASHINGTON PAC
FEC IDENTIFICATION NUMBER
C C00870592

Check if 24-hour report 48-hour report
New report Amends report filed on 10/07/2024

Full Name of Payee INVICTUS ADVERTISING
Mailing Address 16192 COASTAL HIGHWAY
City LEWES State DE Zip Code 19958
Purpose of Expenditure DIGITAL MEDIA PLACEMENT
Amount 325000.00
Transaction ID: SE24.19377
Date of Disbursement or Obligation 10/04/2024
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Office Sought: Senate State: WI
Disbursement For: General 2024

Full Name of Payee SRCP MEDIA, INC.
Mailing Address 201 N. UNION ST SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA PRODUCTION
Amount 99348.50
Transaction ID: SE24.19379
Date of Disbursement or Obligation 10/07/2024
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Office Sought: Senate State: WI
Disbursement For: General 2024

(a) SUBTOTAL of Itemized Independent Expenditures 424348.50
(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.

FISHER, JEDIDIAH, , ,
Signature

Date 10/24/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FIX WASHINGTON PAC
FEC IDENTIFICATION NUMBER
C C00870592

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

Full Name of Payee: SRCP MEDIA, INC.
Mailing Address: 201 N. UNION ST SUITE 200
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Expenditure: MEDIA PRODUCTION
Date of Public Distribution/Dissemination: 10/10/2024
Amount: 11986.00
Transaction ID: SE24.20769
Date of Disbursement or Obligation: 10/10/2024
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Office Sought: Senate State: WI
Disbursement For: General 2024

Full Name of Payee: TOTAL VIDEO PLACEMENTS
Mailing Address: PO BOX 1051
City: NEW ALBANY State: OH Zip Code: 43054
Purpose of Expenditure: MEDIA PLACEMENT
Date of Public Distribution/Dissemination: 10/07/2024
Amount: 1968990.63
Transaction ID: SE24.19378
Date of Disbursement or Obligation: 10/04/2024
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Office Sought: Senate State: WI
Disbursement For: General 2024

(a) SUBTOTAL of Itemized Independent Expenditures 1980976.63
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 2405325.13

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.

FISHER, JEDIDIAH, , ,
Signature

Date 10/24/2024