

**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

MCCONNELL FOR MAJORITY LEADER COMMITTEE

ADDRESS (number and street)

228 S WASHINGTON ST STE 115

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00548651

3. IS THIS
REPORTNEW
(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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

VA

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

LISKER, LISA, , ,

Type or Print Name of Treasurer

Signature of Treasurer

LISKER, LISA, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**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

MCCONNELL FOR MAJORITY LEADER COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 20 2022 To: M M / D D / Y Y Y Y Y Y
11 28 2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2022		21030.03
(b) Cash on Hand at Beginning of Reporting Period.....	31113.27	
(c) Total Receipts (from Line 19)	31122.44	369922.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	62235.71	390952.47
7. Total Disbursements (from Line 31).....	120.90	328837.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	62114.81	62114.81
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MCCONNELL FOR MAJORITY LEADER COMMITTEE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	2	2

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).....	4000.00	142150.00
(ii) Unitemized	0.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4000.00	142300.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	22000.00	222500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	26000.00	364800.00
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).....	5122.44	5122.44
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))	31122.44	369922.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	31122.44	369922.44

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
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	120.90	29137.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	120.90	29137.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	299700.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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)) ..	120.90	328837.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120.90	328837.66

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)	26000.00	364800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26000.00	364800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	120.90	29137.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	5122.44	5122.44
38. Net Operating Expenditures (subtract Line 37 from Line 36)	- 5001.54	24015.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 12
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MCCONNELL FOR MAJORITY LEADER COMMITTEE

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

A. CASPER, JOSEPH, , ,

Mailing Address 616 SOUTH SAINT ASAPH

City

ALEXANDRIA

State

VA

Zip Code

22314-4119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BIA

Occupation (for Individual)

MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2022

Transaction ID : A17332C4FC3FA46D9A1D

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. DUKES, PAULA, , ,

Mailing Address 4 COOPER CT

City

BLUFFTON

State

SC

Zip Code

29910-4809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

THE RIZZO DUKES GROUP

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2022

Transaction ID : A36E15DD9C7834A11A3A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. EDWARDS, MISSY, , ,

Mailing Address 4335 WARREN ST NW

City

WASHINGTON

State

DC

Zip Code

20016-2437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MISSY EDWARDS STRATEGIES.COM

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 22 / 2022

Transaction ID : A3B0ABDA11ED14E3EB6E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

2500.00

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 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MCCONNELL FOR MAJORITY LEADER COMMITTEE

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

A. SHUMATE, GREGORY, S., MR.,

Mailing Address 2030 EDENDERRY DR

City
FT MITCHELL

State
KY

Zip Code
41017-4461

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FROST BROWN TODD LLC

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2022

Transaction ID : A3C6C45E0DC4E4E0B99C

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. WESTINE, LESLEE, , ,

Mailing Address 7108 THRASHER RD

City
MCLEAN

State
VA

Zip Code
22101-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PERSONAL CARE PRODUCT COUNCIL

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2022

Transaction ID : A13438B71AC9F42B0801

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

4000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 12

(check only one)

☐ 11a	☐ 11b	☒ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
			☐ 17

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NAME OF COMMITTEE (In Full)

MCCONNELL FOR MAJORITY LEADER COMMITTEE

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

A. ALNYLAM PHARMACEUTICALS, INC. PAC (ALNYLAM PAC)

Mailing Address 675 W KENDALL ST

City
CAMBRIDGEState
MAZip Code
02142-1168FEC ID number of contributing
federal political committee.

C C00670331

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	20	2022

Transaction ID : A088601E8A5AC4E9E838

Amount of Each Receipt this Period

4000.00

☐ Memo Item

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

B. AMERICAN FINANCIAL SERVICES ASSOC. PAC

Mailing Address 919 18TH ST., NW
STE. 300City
WASHINGTONState
DCZip Code
20006-5526FEC ID number of contributing
federal political committee.

C C00038604

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	20	2022

Transaction ID : A3FBCB0FE4E5B44F6B55

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

C. CARDINAL HEALTH INC. PAC

Mailing Address 7000 CARDINAL PLACE

City
DUBLINState
OHZip Code
43017-1091FEC ID number of contributing
federal political committee.

C C00332833

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	20	2022

Transaction ID : A8B6371FF0BA4467C974

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

9000.00

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 12

(check only one)

☐ 11a	☐ 11b	☒ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

MCCONNELL FOR MAJORITY LEADER COMMITTEE

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

A. GLOBAL MEDICAL RESPONSE INC POLITICAL ACTION COMMITTEE

Mailing Address 6200 S SYRACUSE WAY STE 200

City
GREENWOOD VILLAGEState
COZip Code
80111-4739FEC ID number of contributing
federal political committee.

C C00389585

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M	D D	Y Y Y Y
10	20	2022

Transaction ID : A4F6A5CC800894110B10

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B. INSTITUTE OF MAKERS OF EXPLOSIVES PAC

Mailing Address 1212 NEW YORK AVE NW
STE 650City
WASHINGTONState
DCZip Code
20005-6155FEC ID number of contributing
federal political committee.

C C00135590

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M	D D	Y Y Y Y
10	20	2022

Transaction ID : AC71E8FCEC3F04FF89E4

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

C. NATIONAL ASSN OF HEALTH UNDERWRITERS PAC

Mailing Address 2000 14TH ST N, SUITE 450

City
ARLINGTONState
VAZip Code
22201FEC ID number of contributing
federal political committee.

C C00283135

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M	D D	Y Y Y Y
10	20	2022

Transaction ID : AEE5A0EFF6CA6420CA8E

Amount of Each Receipt this Period

6000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

10500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 12
(check only one)

☐ 11a	☐ 11b	☒ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

MCCONNELL FOR MAJORITY LEADER COMMITTEE

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

A. VIATRIS INC. PAC (VIAPAC)

Mailing Address 660 N CAPITOL ST NW
STE 600

City
WASHINGTON

State
DC

Zip Code
20001-7417

FEC ID number of contributing
federal political committee.

C C00332395

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / **20** / **2022**

Transaction ID : A7D79F09983E34BC6B5A

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B.

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

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

C.

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)..... ▶

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

2500.00

22000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 12
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☒ 15	☐ 16
			☐ 17

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NAME OF COMMITTEE (In Full)

MCCONNELL FOR MAJORITY LEADER COMMITTEE

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

A. BISTRO CACAO

Mailing Address 320 MASSACHUSETTS AVE NE

City
WASHINGTON

State
DC

Zip Code
20002-5702

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 ▼

5122.44

Date of Receipt

11 / 28 / 2022

Transaction ID : A4F5C698A293B45BD971

Amount of Each Receipt this Period

5122.44

☐ Memo Item

VENDOR REFUND OF OVERPAYMENT

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

B.

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

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

C.

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)..... ▶

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

5122.44

5122.44

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)

PAGE 12 OF 12

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MCCONNELL FOR MAJORITY LEADER COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City
NEW ORLEANS

State
LA

Zip Code
70112-5204

Purpose of Disbursement
ONLINE PROCESSING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 28 / 2022

FEC Identification Number

C

Transaction ID : B8890239961

Amount of Each Disbursement this Period

120.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

120.90

120.90