

**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

PAC FOR AMERICA 2

ADDRESS (number and street)

407 W JEFFERSON ST

Check if different  
than previously  
reported. (ACC)

BOISE

ID

83702-6049

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00772442

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)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

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 /

D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M /

07

D D /

01

Y Y Y Y Y Y

2021

through

M M /

12

D D /

31

Y Y Y Y Y Y

2021

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

INSINGER, R. JOHN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

INSINGER, R. JOHN, , ,

[Electronically Filed]

Date

M M /

04

D D /

15

Y Y Y Y Y Y

2022

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

PAC FOR AMERICA 2

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2021

To:

 M M / D D / Y Y Y Y Y  
 12 / 31 / 2021

|                                                                                                                  | COLUMN A<br>This Period                                             | COLUMN B<br>Calendar Year-to-Date                                   |
|------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y<br/>2021</span> |                                                                     | <span style="border: 1px solid black; padding: 2px;">0.00</span>    |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <span style="border: 1px solid black; padding: 2px;">0.00</span>    |                                                                     |
| (c) Total Receipts (from Line 19) .....                                                                          | <span style="border: 1px solid black; padding: 2px;">6251.00</span> | <span style="border: 1px solid black; padding: 2px;">6251.00</span> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <span style="border: 1px solid black; padding: 2px;">6251.00</span> | <span style="border: 1px solid black; padding: 2px;">6251.00</span> |
| 7. Total Disbursements (from Line 31).....                                                                       | <span style="border: 1px solid black; padding: 2px;">304.99</span>  | <span style="border: 1px solid black; padding: 2px;">304.99</span>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <span style="border: 1px solid black; padding: 2px;">5946.01</span> | <span style="border: 1px solid black; padding: 2px;">5946.01</span> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>    |                                                                     |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <span style="border: 1px solid black; padding: 2px;">0.00</span>    |                                                                     |



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

**PAC FOR AMERICA 2**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 2 | 1 |

| <b>I. Receipts</b>                                                                                    | <b>COLUMN A</b><br>Total This Period | <b>COLUMN B</b><br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------|
| 11. Contributions (other than loans) From:                                                            |                                      |                                          |
| (a) Individuals/Persons Other Than Political Committees                                               |                                      |                                          |
| (i) Itemized (use Schedule A).....                                                                    | 6250.00                              | 6250.00                                  |
| (ii) Unitemized .....                                                                                 | 1.00                                 | 1.00                                     |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶                                                       | 6251.00                              | 6251.00                                  |
| (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) .....  | 6251.00                              | 6251.00                                  |
| 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)..... | 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)) .....                         | 6251.00                              | 6251.00                                  |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                   | 6251.00                              | 6251.00                                  |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>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 .....                                                 | 304.99                        | 304.99                            |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 304.99                        | 304.99                            |
| 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) .....                                            | 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)) ..      | 304.99                        | 304.99                            |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 304.99                        | 304.99                            |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/<br>Operating Expenditures                                     | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....         | 6251.00                       | 6251.00                           |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                             | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....     | 6251.00                       | 6251.00                           |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) .....▶ | 304.99                        | 304.99                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                  | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....▶              | 304.99                        | 304.99                            |

# **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 9  
(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)  
**PAC FOR AMERICA 2**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |                                                                                                                                                                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. GOMEZ, ALICE, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 108 LANDS END DR<br>City WILLIAMSBURG State VA Zip Code 23185-3158<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) CORNERSTONE GOVT AFFAIRS Occupation (for Individual) ATTORNEY<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 30 / 2021<br><b>Transaction ID : A408B976461B34479BFF</b><br>Amount of Each Receipt this Period<br>500.00<br><input type="checkbox"/> Memo Item |
| <b>B. KENT, DONALD, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 3106 CIRCLE HILL RD<br>City ALEXANDRIA State VA Zip Code 22305-1606<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) THE NICKLES GROUP Occupation (for Individual) CONSULTANT<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00     |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 30 / 2021<br><b>Transaction ID : AEB18AD2FF75F4541A1D</b><br>Amount of Each Receipt this Period<br>500.00<br><input type="checkbox"/> Memo Item |
| <b>C. LEHMAN, ROB, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 2108 WINDSOR RD<br>City ALEXANDRIA State VA Zip Code 22307-1016<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) WILMER HALE Occupation (for Individual) ADVOCATE<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00                  |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>11 / 10 / 2021<br><b>Transaction ID : A8D65AA443FEF4FF79CE</b><br>Amount of Each Receipt this Period<br>500.00<br><input type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  | 1500.00                                                                                                                                                                                            |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |                                                                                                                                                                                                    |

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

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

FOR LINE NUMBER: PAGE 7 OF 9  
(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             |                              |                              |                             |

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)  
**PAC FOR AMERICA 2**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. TAVLARIDES, MARK, , ,</b></p> <p>Mailing Address <b>3131 CONNECTICUT AVE NW</b><br/><b>APT 2303</b></p> <p>City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20008-5001</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>BGR GROUP</b> Occupation (for Individual) <b>LOBBYIST</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/>500.00</p> |  | <p>Date of Receipt<br/> <b>11 / 30 / 2021</b><br/> <b>Transaction ID : A0780A05553AB423395D</b> </p> <p>Amount of Each Receipt this Period<br/>500.00</p> <p><input type="checkbox"/> Memo Item</p>  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. COHEN, AARON, , ,</b></p> <p>Mailing Address <b>1110 TRINITY DR</b></p> <p>City <b>ALEXANDRIA</b> State <b>VA</b> Zip Code <b>22314-4722</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>CAPITOL COUNSEL</b> Occupation (for Individual) <b>PARTNER</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/>500.00</p>                            |  | <p>Date of Receipt<br/> <b>12 / 01 / 2021</b><br/> <b>Transaction ID : AC671222037924163887</b> </p> <p>Amount of Each Receipt this Period<br/>500.00</p> <p><input type="checkbox"/> Memo Item</p>  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. STYLES, SCOTT, , ,</b></p> <p>Mailing Address <b>2229 WATERFORD GRACE</b></p> <p>City <b>NEW BRAUNFELS</b> State <b>TX</b> Zip Code <b>78130-8972</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>BOCKORNY</b> Occupation (for Individual) <b>CONSULTANT</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼<br/>1000.00</p>                        |  | <p>Date of Receipt<br/> <b>12 / 02 / 2021</b><br/> <b>Transaction ID : AF70FE70B0FB346B88E1</b> </p> <p>Amount of Each Receipt this Period<br/>1000.00</p> <p><input type="checkbox"/> Memo Item</p> |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 2000.00                                                                                                                                                                                              |
| <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                      |

# 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 9  
(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 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)  
**PAC FOR AMERICA 2**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |                                                                                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. VOLKER, KURT, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 5053 LOUGHBORO RD NW<br>City WASHINGTON State DC Zip Code 20016-2615<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) BGR GROUP Occupation (for Individual) SENIOR ADVISOR<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00           |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 / 07 / 2021<br><b>Transaction ID : AF59D5F7E81C34253A6E</b><br>Amount of Each Receipt this Period<br>1000.00<br><input type="checkbox"/> Memo Item |
| <b>B. BREIER, KIMBERLY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 5304 REMINGTON DR<br>City ALEXANDRIA State VA Zip Code 22309-3344<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) COVINGTON & BURLING Occupation (for Individual) SENIOR ADVISOR<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 / 08 / 2021<br><b>Transaction ID : A66D8F555AAE144E3ABA</b><br>Amount of Each Receipt this Period<br>500.00<br><input type="checkbox"/> Memo Item  |
| <b>C. MUNSON, LESTER, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 2013 SWAN TER<br>City ALEXANDRIA State VA Zip Code 22307-1361<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) BGR GROUP Occupation (for Individual) CONSULTANT<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00                    |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 / 10 / 2021<br><b>Transaction ID : AFF18D8A6E8C646A3B4B</b><br>Amount of Each Receipt this Period<br>1250.00<br><input type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  | 2750.00                                                                                                                                                                                           |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  | 6250.00                                                                                                                                                                                           |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 9

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)  
**PAC FOR AMERICA 2**

Full Name (Last, First, Middle Initial)

**A. EDONATION.COM**

Mailing Address 118 S ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
FUNDRAISING FEES

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : BC3C772434

Amount of Each Disbursement this Period

46.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EDONATION.COM**

Mailing Address 118 S ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
FUNDRAISING FEES

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 |   |   | 2 | 0 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : BE321B928BI

Amount of Each Disbursement this Period

50.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EDONATION.COM**

Mailing Address 118 S ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
FUNDRAISING FEES

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 |   |   | 3 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : B23FC6DD3f

Amount of Each Disbursement this Period

207.35

☐ Memo Item

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

304.99

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

304.99