

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

ACROSS THE AISLE PAC

ADDRESS (number and street) 910 17TH ST NW STE 925

Check if different than previously reported. (ACC) WASHINGTON DC 20006

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00696591 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 / 01 / 2019 through 12 / 31 / 2019

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 Kyriacopoulos, Janica, , ,

Signature of Treasurer Kyriacopoulos, Janica, , , [Electronically Filed] Date 01 / 30 / 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ACROSS THE AISLE PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="42349.65"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="125000.00"/>	<input type="text" value="178000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="167349.65"/>	<input type="text" value="178000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="105828.11"/>	<input type="text" value="116478.46"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="61521.54"/>	<input type="text" value="61521.54"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

ACROSS THE AISLE PAC

Report Covering the Period: From: / / To: / /

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).....	7500.00	9500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7500.00	9500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	117500.00	168500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	125000.00	178000.00
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)).....▶	125000.00	178000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	125000.00	178000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	50828.11	50978.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	50828.11	50978.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	65500.00
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)) ..	105828.11	116478.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	105828.11	116478.46

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)	125000.00	178000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	125000.00	178000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	50828.11	50978.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	50828.11	50978.46

**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 6 OF 36
<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)
ACROSS THE AISLE PAC

A. Castellano, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2821 23rd St N
 City Arlington State VA Zip Code 22201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWDC Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 25 / 2019
Transaction ID : SA11AI.4205
 Amount of Each Receipt this Period 500.00
 Memo Item

B. ActBlue PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City Somerville State MA Zip Code 02144
 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 ▼ 1500.00

Date of Receipt 07 / 18 / 2019
Transaction ID : SA11AI.4205.0
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Cooper, Shawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 S. View Court
 City Fairfax Station State VA Zip Code 22039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PG&E Corporation Occupation (for Individual) Utility Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2019
Transaction ID : SA11AI.4238
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 36
	<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"/> 17	

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. ActBlue Technical Services

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

Mailing Address 14 Arrow St

City Cambridge	State MA	Zip Code 02138
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2019

Transaction ID : SA11AI.4238.0

Amount of Each Receipt this Period
500.00

Memo Item

B. Kalkut, Craig, , ,

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

Mailing Address 2919 Cathedral Avenue NW

City Washington	State DC	Zip Code 20008
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) West Front Strategies	Occupation (for Individual) Government Affairs
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2019

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period
500.00

Memo Item

C. ActBlue PAC

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

Mailing Address PO Box 441146

City Sommerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2019

Transaction ID : SA11AI.4228.0

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 36
	<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"/> 17	

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. Silverman, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9224 Woodland Dr.
 City Silver Spring State MD Zip Code 20910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Venn Strategies, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2019
Transaction ID : SA11AI.4249
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Whitman, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 Sand Hill Rd., Apt 407G
 City Palo Alto State CA Zip Code 94304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Quibi Occupation (for Individual) Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 06 / 2019
Transaction ID : SA11AI.4318
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. ActBlue PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City Somerville State MA Zip Code 02144
 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 ▼ 7000.00

Date of Receipt 10 / 31 / 2019
Transaction ID : SA11AI.4318.0
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	7500.00

**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 9 OF 36
<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)
ACROSS THE AISLE PAC

A. American Academy of Dermatology Association PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1445 New York Ave NW
Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 08 / 2019
Transaction ID : SA11C.4210

Amount of Each Receipt this Period
5000.00

Memo Item

B. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1111 14TH STREET, NW
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 25 / 2019
Transaction ID : SA11C.4328

Amount of Each Receipt this Period
5000.00

Memo Item

C. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 208 S. AKARD STREET
SUITE 1812

City DALLAS State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 04 / 2019
Transaction ID : SA11C.4334

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 10 OF 36
<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)
ACROSS THE AISLE PAC

A. Burns & McDonnell, Inc PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9400 Ward Parkway
 City Kansas City State KS Zip Code 64114
 FEC ID number of contributing federal political committee. **C** C00442913
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 21 / 2019**
Transaction ID : SA11C.4253
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 CAPITAL ONE DRIVE
 City MCLEAN State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C** C00326595
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 12 / 2019**
Transaction ID : SA11C.4331
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 ATLANTIC STREET 10TH FLOOR
 City STAMFORD State CT Zip Code 06901
 FEC ID number of contributing federal political committee. **C** C00426775
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **11 / 05 / 2019**
Transaction ID : SA11C.4333
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	8500.00
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 11 OF 36
<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)
ACROSS THE AISLE PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CMS ENERGY CORPORATION EMPLOYEES FOR BETTER GOVERNMENT- FEDERAL

Mailing Address ONE ENERGY PLAZA
EP8-220

City JACKSON	State MI	Zip Code 49201
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FEC ID number of contributing federal political committee. **C** C00075473

Name of Employer (for Individual)	Occupation (for Individual)
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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	/	11	/	2019

Transaction ID : SA11C.4245

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City Philadelphia	State PA	Zip Code 19103
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FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer (for Individual)	Occupation (for Individual)
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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
07	/	30	/	2019

Transaction ID : SA11C.4212

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F STREET NW SUITE 300

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00477653

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2019

Transaction ID : SA11C.4326

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	8500.00
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 12 OF 36
<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)
ACROSS THE AISLE PAC

A. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

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

Mailing Address 99 M ST, SE
SUITE 300

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00007880

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2019

Transaction ID : SA11C.4234

Amount of Each Receipt this Period
5000.00

Memo Item

B. EMPLOYEE--OWNED S CORPORATIONS OF AMERICA PAC (ESCA PAC)

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

Mailing Address 1341 G STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00458257

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2019

Transaction ID : SA11C.4247

Amount of Each Receipt this Period
1000.00

Memo Item

C. EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)

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

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 400 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00141218

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 20 / 2019

Transaction ID : SA11C.4347

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
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 13 OF 36
<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)
ACROSS THE AISLE PAC

A. FEDEX CORPORATION POLITICAL ACTION COMMITTEE

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

Mailing Address 942 S SHADY GROVE ROAD

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00068692

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2019

Transaction ID : SA11C.4201

Amount of Each Receipt this Period
1000.00

Memo Item

B. GARNEY HOLDING CO. PAC

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

Mailing Address 1333 NW VIVION ROAD

City KANSAS CITY	State MO	Zip Code 64118
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00442905

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2019

Transaction ID : SA11C.4336

Amount of Each Receipt this Period
1000.00

Memo Item

C. GOOGLE LLC NETPAC

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

Mailing Address 25 MASSACHUSETTS AVE, NW
9TH FLOOR

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00428623

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
11		25		2019

Transaction ID : SA11C.4327

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 14 OF 36
<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)
ACROSS THE AISLE PAC

A. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

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

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00105981

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
09	/	25	/	2019

Transaction ID : SA11C.4236

Amount of Each Receipt this Period
5000.00

Memo Item

B. MESSER CONSTRUCTION CO PAC

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

Mailing Address 643 W COURT STREET

City CINCINNATI	State OH	Zip Code 45203
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00435990

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2019

Transaction ID : SA11C.4259

Amount of Each Receipt this Period
1000.00

Memo Item

C. MMC CORP POLITICAL ACTION COMMITTEE

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

Mailing Address 10955 LOWELL AVE #350

City OVERLAND PARK	State KS	Zip Code 66210
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00509356

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2019

Transaction ID : SA11C.4256

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 15 OF 36
<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)
ACROSS THE AISLE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Morgan Stanley PAC

Mailing Address 1585 Broadway Fl 9

City New York	State NY	Zip Code 10036
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00337626

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
08	/	19	/	2019

Transaction ID : SA11C.4218

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 4300 WILSON BLVD
SUITE 800

City ARLINGTON	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00113241

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	/	31	/	2019

Transaction ID : SA11C.4332

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NATIONAL ASSOCIATION OF REALTORS

Mailing Address 430 N MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C70002563

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
12	/	10	/	2019

Transaction ID : SA11C.4342

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 16 OF 36
<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)
ACROSS THE AISLE PAC

A. National Multi Housing Council

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

Mailing Address 1775 EYE ST. NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00130773

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
07		18		2019

Transaction ID : SA11C.4197

Amount of Each Receipt this Period
5000.00

Memo Item

B. National Sand Stone and Gravel Association ROCKPAC

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

Mailing Address 66 CANAL CENTER PLAZA SUITE 300

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

FEC ID number of contributing federal political committee. **C** C00089458

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
09		20		2019

Transaction ID : SA11C.4233

Amount of Each Receipt this Period
5000.00

Memo Item

C. NCTA - THE INTERNET AND TELEVISION ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

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

Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010082

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2019

Transaction ID : SA11C.4337

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
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 17 OF 36
<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)
ACROSS THE AISLE PAC

A. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK	State NY	Zip Code 10010
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00158881

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
12	/	31	/	2019

Transaction ID : SA11C.4353

Amount of Each Receipt this Period
2500.00

Memo Item

B. PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 NEWPORT CENTER DRIVE

City NEWPORT BEACH	State CA	Zip Code 92660
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00068528

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
11	/	19	/	2019

Transaction ID : SA11C.4329

Amount of Each Receipt this Period
2500.00

Memo Item

C. PECKHAM INDUSTRIES, INC. FEDERAL PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 HAARLEM AVENUE

City WHITE PLAINS	State NY	Zip Code 10603
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00343681

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
12	/	10	/	2019

Transaction ID : SA11C.4344

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
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 18 OF 36
<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)
ACROSS THE AISLE PAC

A. PG&E CORPORATION EMPLOYEES ENERGYPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 77 BEALE STREET, MAIL CODE: B29H

City San Francisco	State CA	Zip Code 94177
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00177469

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
07		03		2019

Transaction ID : SA11C.4139

Amount of Each Receipt this Period
2500.00

Memo Item

B. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 317 MASSACHUSETTS AVE., N.E.
1ST FLOOR

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00343137

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
07		18		2019

Transaction ID : SA11C.4199

Amount of Each Receipt this Period
5000.00

Memo Item

C. REGIONS FINANCIAL CORPORATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1015 15TH STREET NW
SUITE 920

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00432252

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
07		24		2019

Transaction ID : SA11C.4203

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 19 OF 36
<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)
ACROSS THE AISLE PAC

A. The Council of Insurance Agents & Brokers Political Action Committee

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

Mailing Address 701 Pennsylvania Avenue, NW
Suite 750

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

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 / 11 / 2019

Transaction ID : SA11C.4243

Amount of Each Receipt this Period
5000.00

Memo Item

B. THE GRANT THORNTON LLP POLITICAL ACTION COMMITTEE LLC

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

Mailing Address 171 N. Clark Street
Suite 200

City Chicago State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C** C00408260

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
09 / 10 / 2019

Transaction ID : SA11C.4226

Amount of Each Receipt this Period
2500.00

Memo Item

C. UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)

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

Mailing Address 600 WASHINGTON BOULEVARD

City STAMFORD State CT Zip Code 06901

FEC ID number of contributing federal political committee. **C** C00012245

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
08 / 19 / 2019

Transaction ID : SA11C.4219

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 20 OF 36
<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)
ACROSS THE AISLE PAC

A. UNITED PARCEL SERVICE INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA	State GA	Zip Code 30328
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064766

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
12	/	31	/	2019

Transaction ID : SA11C.4352

Amount of Each Receipt this Period
5000.00

Memo Item

B. WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2019

Transaction ID : SA11C.4330

Amount of Each Receipt this Period
1000.00

Memo Item

C. WAWA, INC. POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address C/O WIPFLI, LLP
2 W. BALTIMORE AVENUE, SUITE 210

City MEDIA	State PA	Zip Code 19063
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00148510

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2019

Transaction ID : SA11C.4335

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	117500.00

**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)
ACROSS THE AISLE PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2019

FEC Identification Number

C []
Transaction ID : SB21B.4338
Amount of Each Disbursement this Period
[] 197.50

Memo Item

Full Name (Last, First, Middle Initial)

B. BRINDISI FOR CONGRESS

Mailing Address PO BOX 165

City UTICA State NY Zip Code 13503

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 22

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2019

FEC Identification Number

C C00648725
Transaction ID : SB21B.4356
Amount of Each Disbursement this Period
[] 2200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BRINDISI FOR CONGRESS

Mailing Address PO BOX 165

City UTICA State NY Zip Code 13503

Purpose of Disbursement

Candidate Name
BRINDISI, ANTHONY, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 22

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2019

FEC Identification Number

C C00648725
Transaction ID : SB21B.4357
Amount of Each Disbursement this Period
[] 300.00

Memo Item

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

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

[] 2697.50

**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)
ACROSS THE AISLE PAC

Full Name (Last, First, Middle Initial) A. Capelianis Consulting		Date of Disbursement MM / DD / YYYY 11 / 25 / 2019
Mailing Address 221 North Patrick Street		FEC Identification Number C Transaction ID : SB21B.4360 Amount of Each Disbursement this Period 775.53
City Alexandria	State VA	
Zip Code 23314	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Molly Allen Associates, LLC		Date of Disbursement MM / DD / YYYY 07 / 16 / 2019
Mailing Address 10402 Parkwood Drive		FEC Identification Number C Transaction ID : SB21B.4222 Amount of Each Disbursement this Period 15403.83
City Kensington	State MD	
Zip Code 20895	Purpose of Disbursement PAC Fundraising Services	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Molly Allen Associates, LLC		Date of Disbursement MM / DD / YYYY 09 / 10 / 2019
Mailing Address 10402 Parkwood Drive		FEC Identification Number C Transaction ID : SB21B.4260 Amount of Each Disbursement this Period 5045.47
City Kensington	State MD	
Zip Code 20895	Purpose of Disbursement PAC Fundraising Services	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

21224.83

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)
ACROSS THE AISLE PAC

Full Name (Last, First, Middle Initial)

A. Molly Allen Associates, LLC

Mailing Address 10402 Parkwood Drive

City
Kensington

State
MD

Zip Code
20895

Purpose of Disbursement
PAC Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4262

Amount of Each Disbursement this Period

[REDACTED] 10365.42

Memo Item

Full Name (Last, First, Middle Initial)

B. Molly Allen Associates, LLC

Mailing Address 10402 Parkwood Drive

City
Kensington

State
MD

Zip Code
20895

Purpose of Disbursement
PAC Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4375

Amount of Each Disbursement this Period

[REDACTED] 10695.26

Memo Item

Full Name (Last, First, Middle Initial)

C. Molly Allen Associates, LLC

Mailing Address 10402 Parkwood Drive

City
Kensington

State
MD

Zip Code
20895

Purpose of Disbursement
PAC Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4348

Amount of Each Disbursement this Period

[REDACTED] 5045.85

Memo Item

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

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

[REDACTED] 26106.53

[REDACTED] 50028.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

Full Name (Last, First, Middle Initial) A. BRINDISI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address PO BOX 165		FEC Identification Number C C00648725 Transaction ID : SB23.4263 Amount of Each Disbursement this Period 1800.00
City UTICA	State NY	
Zip Code 13503	Purpose of Disbursement Campaign Contribution	Memo Item <input type="checkbox"/>
Candidate Name BRINDISI, ANTHONY, , ,	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 22	

Full Name (Last, First, Middle Initial) B. BRINDISI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address PO BOX 165		FEC Identification Number C C00648725 Transaction ID : SB23.4358 Amount of Each Disbursement this Period 700.00
City UTICA	State NY	
Zip Code 13503	Purpose of Disbursement Campaign Contribution	Memo Item <input type="checkbox"/>
Candidate Name BRINDISI, ANTHONY, , ,	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 22	

Full Name (Last, First, Middle Initial) C. DAN LIPINSKI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address PO BOX 520		FEC Identification Number C C00405431 Transaction ID : SB23.4264 Amount of Each Disbursement this Period 1500.00
City WESTERN SPRINGS	State IL	
Zip Code 60558	Purpose of Disbursement Campaign Contribution	Memo Item <input type="checkbox"/>
Candidate Name DAN LIPINSKI FOR CONGRESS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 03	

SUBTOTAL of Disbursements This Page (optional).....▶	4000.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 520

M M M	/	D D D	/	Y Y Y Y Y
12		10		2019

City
WESTERN SPRINGS

State
IL

Zip Code
60558

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C	C00405431
---	-----------

Transaction ID : SB23.4361

Amount of Each Disbursement this Period

Candidate Name

DAN LIPINSKI FOR CONGRESS

Category/
Type

1500.00

Office Sought:

House
 Senate
 President

Disbursement For: 2020

Primary General
 Other (specify) ▼

Memo Item

State: IL District: 03

B. ELAINE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 66191

M M M	/	D D D	/	Y Y Y Y Y
09		25		2019

City
VIRGINIA BEACH

State
VA

Zip Code
23466

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C	C00664375
---	-----------

Transaction ID : SB23.4265

Amount of Each Disbursement this Period

Candidate Name

LURIA, ELAINE, , ,

Category/
Type

500.00

Office Sought:

House
 Senate
 President

Disbursement For: 2020

Primary General
 Other (specify) ▼

Memo Item

State: VA District: 02

C. ELAINE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 66191

M M M	/	D D D	/	Y Y Y Y Y
12		10		2019

City
VIRGINIA BEACH

State
VA

Zip Code
23466

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C	C00664375
---	-----------

Transaction ID : SB23.4362

Amount of Each Disbursement this Period

Candidate Name

LURIA, ELAINE, , ,

Category/
Type

1500.00

Office Sought:

House
 Senate
 President

Disbursement For: 2020

Primary General
 Other (specify) ▼

Memo Item

State: VA District: 02

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

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

3500.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. FRIENDS OF BEN MCADAMS

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 522167

City: SALT LAKE CITY State: UT Zip Code: 84152

Purpose of Disbursement: Campaign Contribution

Candidate Name: _____

Office Sought: House Senate President
State: UT District: 04

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement: 12 / 10 / 2019

FEC Identification Number: C00658633
Transaction ID : SB23.4365
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. JERSEY VALUES PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 65322

City: WASHINGTON State: DC Zip Code: 20035

Purpose of Disbursement: PAC Contribution

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2019
 Primary General
 Other (specify) ▼

Date of Disbursement: 12 / 10 / 2019

FEC Identification Number: C00652164
Transaction ID : SB23.4368
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. JIM COSTA FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2037 W BULLARD AVE # 355

City: FRESNO State: CA Zip Code: 93711

Purpose of Disbursement: Campaign Contribution

Candidate Name: COSTA, JIM, , ,

Office Sought: House Senate President
State: CA District: 16

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement: 09 / 25 / 2019

FEC Identification Number: C00391029
Transaction ID : SB23.4266
Amount of Each Disbursement this Period: 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9000.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. JIM COSTA FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 2037 W BULLARD AVE
355

City FRESNO State CA Zip Code 93711

Purpose of Disbursement
Campaign Contribution

Candidate Name
COSTA, JIM, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: CA District: 16

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 10 / 2019

FEC Identification Number

C C00391029

Transaction ID : SB23.4369
Amount of Each Disbursement this Period

500.00

Memo Item

B. JIMMY PANETTA FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1579

City CARMEL VALLEY State CA Zip Code 93924

Purpose of Disbursement
Campaign Contribution

Candidate Name
PANETTA, JIMMY, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: CA District: 20

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2019

FEC Identification Number

C C00592154

Transaction ID : SB23.4271
Amount of Each Disbursement this Period

1000.00

Memo Item

C. JIMMY PANETTA FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1579

City CARMEL VALLEY State CA Zip Code 93924

Purpose of Disbursement
Campaign Contribution

Candidate Name
PANETTA, JIMMY, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: CA District: 20

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 10 / 2019

FEC Identification Number

C C00592154

Transaction ID : SB23.4370
Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

3000.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. JOSH GOTTHEIMER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 584

City RIDGEWOOD State NJ Zip Code 07451

Purpose of Disbursement Campaign Contribution

Candidate Name GOTTHEIMER, JOSH, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement: 09 / 25 / 2019

FEC Identification Number: C00573949
Transaction ID : SB23.4272
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. JOSH GOTTHEIMER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 584

City RIDGEWOOD State NJ Zip Code 07451

Purpose of Disbursement Campaign Contribution

Candidate Name GOTTHEIMER, JOSH, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement: 12 / 10 / 2019

FEC Identification Number: C00573949
Transaction ID : SB23.4371
Amount of Each Disbursement this Period: 2500.00

Memo Item

C. JOSH HARDER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 4426

City MODESTO State CA Zip Code 95352

Purpose of Disbursement Campaign Contribution

Candidate Name HARDER, JOSH, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 10

Date of Disbursement: 09 / 25 / 2019

FEC Identification Number: C00639146
Transaction ID : SB23.4273
Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7000.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

Full Name (Last, First, Middle Initial) A. JOSH HARDER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 10 / 2019
Mailing Address PO BOX 4426		FEC Identification Number C00639146 Transaction ID : SB23.4372
City MODESTO	State CA	Zip Code 95352
Purpose of Disbursement Campaign Contribution	Category/ Type	Amount of Each Disbursement this Period 2500.00
Candidate Name HARDER, JOSH, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: CA District: 10	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. KURT SCHRADER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address PO BOX 3314		FEC Identification Number C00446906 Transaction ID : SB23.4274
City OREGON CITY	State OR	Zip Code 97045
Purpose of Disbursement Campaign Contribution	Category/ Type	Amount of Each Disbursement this Period 2000.00
Candidate Name SCHRADER, KURT, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: OR District: 05	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. KURT SCHRADER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 10 / 2019
Mailing Address PO BOX 3314		FEC Identification Number C00446906 Transaction ID : SB23.4373
City OREGON CITY	State OR	Zip Code 97045
Purpose of Disbursement Campaign Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name SCHRADER, KURT, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: OR District: 05	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	5500.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

Full Name (Last, First, Middle Initial) A. MAX ROSE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019	
Mailing Address PO BOX 100496			
City STATEN ISLAND	State NY	Zip Code 10310	
Purpose of Disbursement Campaign Contribution		FEC Identification Number C00652248 Transaction ID : SB23.4275	
Candidate Name ROSE, MAX, , ,		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 11	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MAX ROSE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 26 / 2019	
Mailing Address PO BOX 100496			
City STATEN ISLAND	State NY	Zip Code 10310	
Purpose of Disbursement Campaign Contribution		FEC Identification Number C00652248 Transaction ID : SB23.4276	
Candidate Name ROSE, MAX, , ,		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 11	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MAX ROSE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 10 / 2019	
Mailing Address PO BOX 100496			
City STATEN ISLAND	State NY	Zip Code 10310	
Purpose of Disbursement Campaign Contribution		FEC Identification Number C00652248 Transaction ID : SB23.4374	
Candidate Name ROSE, MAX, , ,		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 11	<input type="checkbox"/> Memo Item		

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

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

3000.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. SALUD CARBAJAL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1290

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	9

City SANTA BARBARA State CA Zip Code 93102

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C C00576041

Candidate Name
CARBAJAL, SALUD, , ,

Category/
Type

Transaction ID : SB23.4277

Amount of Each Disbursement this Period

2000.00

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: CA District: 24

Memo Item

B. SALUD CARBAJAL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1290

M	M	/	D	D	/	Y	Y	Y	Y
	1		2	0		2	0	1	9

City SANTA BARBARA State CA Zip Code 93102

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C C00576041

Candidate Name
CARBAJAL, SALUD, , ,

Category/
Type

Transaction ID : SB23.4376

Amount of Each Disbursement this Period

1500.00

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: CA District: 24

Memo Item

C. SCHNEIDER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1318

M	M	/	D	D	/	Y	Y	Y	Y
	0		2	5		2	0	1	9

City DEERFIELD State IL Zip Code 60015

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C C00495952

Candidate Name
SCHNEIDER, BRADLEY, , ,

Category/
Type

Transaction ID : SB23.4288

Amount of Each Disbursement this Period

500.00

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: IL District: 10

Memo Item

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

4000.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. SCHNEIDER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1318

City
DEERFIELD

State
IL

Zip Code
60015

Purpose of Disbursement
Campaign Contribution

Candidate Name

SCHNEIDER, BRADLEY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2019			

FEC Identification Number

C C00495952

Transaction ID : SB23.4377

Amount of Each Disbursement this Period

500.00

Memo Item

B. SCOTT PETERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 22074

City
SAN DIEGO

State
CA

Zip Code
92192

Purpose of Disbursement
Campaign Contribution

Candidate Name

PETERS, SCOTT, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: CA District: 52

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2019			

FEC Identification Number

C C00503110

Transaction ID : SB23.4380

Amount of Each Disbursement this Period

500.00

Memo Item

C. SPANBERGER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3121

City
GLEN ALLEN

State
VA

Zip Code
23058

Purpose of Disbursement
Campaign Contribution

Candidate Name

SPANBERGER, ABIGAIL, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: VA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			25			2019			

FEC Identification Number

C C00649913

Transaction ID : SB23.4291

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

2500.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. SPANBERGER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3121

M M M	/	D D D	/	Y Y Y Y Y
12		10		2019

City GLEN ALLEN State VA Zip Code 23058

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C C00649913

Candidate Name
SPANBERGER, ABIGAIL, , ,

Category/
Type

Transaction ID : SB23.4381

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: VA District: 07

2000.00

Memo Item

B. STEPHANIE MURPHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 205

M M M	/	D D D	/	Y Y Y Y Y
09		25		2019

City WINTER PARK State FL Zip Code 32790

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C C00620443

Candidate Name
MURPHY, STEPHANIE, , ,

Category/
Type

Transaction ID : SB23.4292

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: FL District: 07

1000.00

Memo Item

C. SUOZZI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 669

M M M	/	D D D	/	Y Y Y Y Y
12		10		2019

City GLEN COVE State NY Zip Code 11542

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

C C00607200

Candidate Name
SUOZZI, THOMAS, , ,

Category/
Type

Transaction ID : SB23.4388

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 03

1500.00

Memo Item

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

4500.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. SUSIE LEE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 5130 S FORT APACHE RD
STE. 215-382

City LAS VEGAS State NV Zip Code 89148

Purpose of Disbursement
Campaign Contribution

Candidate Name
LEE, SUSIE, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NV District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2019

FEC Identification Number

C C00655613

Transaction ID : SB23.4294

Amount of Each Disbursement this Period

1500.00

Memo Item

B. SUSIE LEE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 5130 S FORT APACHE RD
STE. 215-382

City LAS VEGAS State NV Zip Code 89148

Purpose of Disbursement
Campaign Contribution

Candidate Name
LEE, SUSIE, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NV District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 10 / 2019

FEC Identification Number

C C00655613

Transaction ID : SB23.4382

Amount of Each Disbursement this Period

1000.00

Memo Item

C. TOM O'HALLERAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 63992

City PHOENIX State AZ Zip Code 85082

Purpose of Disbursement
Campaign Contribution

Candidate Name
O'HALLERAN, TOM, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: AZ District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2019

FEC Identification Number

C C00582890

Transaction ID : SB23.4297

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. TOM O'HALLERAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 63992

M M M	/	D D D	/	Y Y Y Y Y
12		10		2019

City PHOENIX State AZ Zip Code 85082

FEC Identification Number

Purpose of Disbursement Campaign Contribution

C	C00582890
---	-----------

Candidate Name O'HALLERAN, TOM, , ,

Category/Type

Transaction ID : SB23.4383

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: AZ District: 01

1500.00

Memo Item

B. VAN DREW FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 671

M M M	/	D D D	/	Y Y Y Y Y
09		25		2019

City CAPE MAY COURT HOU State NJ Zip Code 08210

FEC Identification Number

Purpose of Disbursement Campaign Contribution

C	C00661868
---	-----------

Candidate Name VAN DREW, JEFF, , ,

Category/Type

Transaction ID : SB23.4298

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: NJ District: 02

1500.00

Memo Item

C. XOCHITL FOR NEW MEXICO

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2250

M M M	/	D D D	/	Y Y Y Y Y
09		25		2019

City LAS CRUCES State NM Zip Code 88004

FEC Identification Number

Purpose of Disbursement Campaign Contribution

C	C00666149
---	-----------

Candidate Name TORRES SMALL, XOCHITL, , ,

Category/Type

Transaction ID : SB23.4302

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: NM District: 02

500.00

Memo Item

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

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

3500.00

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

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NAME OF COMMITTEE (In Full)
ACROSS THE AISLE PAC

A. XOCHITL FOR NEW MEXICO

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2250

City LAS CRUCES State NM Zip Code 88004

Purpose of Disbursement Campaign Contribution

Candidate Name TORRES SMALL, XOCHITL, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: NM District: 02

Date of Disbursement: 12 / 10 / 2019

FEC Identification Number: C 00666149
Transaction ID : SB23.4384
Amount of Each Disbursement this Period: 2000.00

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
Disbursement For: Primary General Other (specify)

State: District:

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
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	55000.00