

**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

Center Aisle PAC

ADDRESS (number and street)

611 Pennsylvania Ave SE

Ste 143

Washington

DC

20003

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00620443

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

05

01

2024

05

31

2024

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

Type or Print Name of Treasurer

Lee, Lauren, Decot, ,

Signature of Treasurer

Lee, Lauren, Decot, ,

Date

M M M /

D D D /

Y Y Y Y Y Y

06

20

2024

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

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

Center Aisle PACReport Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
05		01		2024

 To:

M M	/	D D	/	Y Y Y Y Y
05		31		2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2024		1292578.64
(b) Cash on Hand at Beginning of Reporting Period.....	1254114.15	
(c) Total Receipts (from Line 19)	3495.43	18025.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1257609.58	1310604.44
7. Total Disbursements (from Line 31)	16131.54	69126.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1241478.04	1241478.04
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Center Aisle PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
05 01 2024

To:

M M / D D / Y Y Y Y
05 31 2024**I. Receipts****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

0.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

1000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

0.00

1000.00

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.).....

3495.43

17025.80

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))

3495.43

18025.80

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

3495.43

18025.80

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9631.54	50126.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9631.54	50126.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	14500.00
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).....	2500.00	4500.00
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)) ..	16131.54	69126.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16131.54	69126.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	0.00	1000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	1000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9631.54	50126.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9631.54	50126.40

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 25
(check only one)

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

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

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

A. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708FEC 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 ▼

17025.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 6147860

Amount of Each Receipt this Period

3495.43

☐ Memo Item

Interest

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3495.43

3495.43

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. Corcoran Street Group LLC

Mailing Address 3526 Park PI NW

City
WashingtonState
DCZip Code
20010-3079

Purpose of Disbursement

Political Strategy and Fundraising Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	5			2	2		2	0	2	4	

FEC Identification Number

C

Transaction ID : 500661970

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MBA Consulting GroupMailing Address 611 Pennsylvania Ave SE
143City
WashingtonState
DCZip Code
20003-4303

Purpose of Disbursement

Compliance Consulting, Postage

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	5			2	3		2	0	2	4	

FEC Identification Number

C

Transaction ID : 500661437

Amount of Each Disbursement this Period

503.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.Mailing Address 1445 New York Ave NW
20City
WashingtonState
DCZip Code
20005-2134

Purpose of Disbursement

Database Support

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	5			0	3		2	0	2	4	

FEC Identification Number

C

Transaction ID : 500659408

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3003.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. Murphy, Stephanie, , ,

Mailing Address PO Box 205

City
Winter ParkState
FLZip Code
32790-0205

Purpose of Disbursement

Travel, Meals, Catering, Subscription Reimbursement - See Below if Itemized

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664558

Amount of Each Disbursement this Period

6628.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Conrad Washington DC

Mailing Address 950 New York Ave NW

City
WashingtonState
DCZip Code
20001-3894

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664600

Amount of Each Disbursement this Period

55.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Expedia

Mailing Address 333 108th Ave NE

City
BellevueState
WAZip Code
98004-5703

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664610

Amount of Each Disbursement this Period

24.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6	6	2	8	.	0	4						

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. MCO Transfer

Mailing Address 359 Streamview Way

City
Winter SpringsState
FLZip Code
32708-6409

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664560

Amount of Each Disbursement this Period

170.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664570

Amount of Each Disbursement this Period

74.58

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664580

Amount of Each Disbursement this Period

61.55

☒ Memo Item *

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664590

Amount of Each Disbursement this Period

57.99

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. MCO Transfer

Mailing Address 359 Streamview Way

City
Winter SpringsState
FLZip Code
32708-6409

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664561

Amount of Each Disbursement this Period

170.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664571

Amount of Each Disbursement this Period

5.51

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664581

Amount of Each Disbursement this Period

2.68

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664591

Amount of Each Disbursement this Period

96.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Alamo Rent-A-Car

Mailing Address 1 Jeff Fuqua Blvd

City
OrlandoState
FLZip Code
32827-4392

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664602

Amount of Each Disbursement this Period

279.28

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664562

Amount of Each Disbursement this Period

2.90

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664572

Amount of Each Disbursement this Period

5.64

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664582

Amount of Each Disbursement this Period

28.40

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. The Westin Washington

Mailing Address 999 9th St NW

City
WashingtonState
DCZip Code
20001-4427

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664592

Amount of Each Disbursement this Period

2208.72

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4255 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2603

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664603

Amount of Each Disbursement this Period

214.10

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664563

Amount of Each Disbursement this Period

5.22

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664573

Amount of Each Disbursement this Period

26.10

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664583

Amount of Each Disbursement this Period

33.76

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. JetBlueMailing Address 6322 S 3000 E
Ste G10City
Salt Lake CityState
UTZip Code
84121-6945

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664604

Amount of Each Disbursement this Period

80.00

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664564

Amount of Each Disbursement this Period

18.32

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664574

Amount of Each Disbursement this Period

27.74

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664584

Amount of Each Disbursement this Period

36.21

☒ Memo Item *

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

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

0	0	0										

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. Shoto Washington DC

Mailing Address 1100 15th St NW

City
WashingtonState
DCZip Code
20005-1707

Purpose of Disbursement

Meals

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664594

Amount of Each Disbursement this Period

491.28

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. JetBlueMailing Address 6322 S 3000 E
Ste G10City
Salt Lake CityState
UTZip Code
84121-6945

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664605

Amount of Each Disbursement this Period

188.10

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664565

Amount of Each Disbursement this Period

50.20

☒ Memo Item *

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

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

0	0	0										

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664575

Amount of Each Disbursement this Period

34.47

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664585

Amount of Each Disbursement this Period

39.37

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Renaissance Washington DC

Mailing Address 999 9th St NW

City
WashingtonState
DCZip Code
20001-4427

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664595

Amount of Each Disbursement this Period

54.59

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 233 S Wacker Dr

City
ChicagoState
ILZip Code
60606-7147

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664606

Amount of Each Disbursement this Period

8.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664566

Amount of Each Disbursement this Period

136.09

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664586

Amount of Each Disbursement this Period

56.03

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. Expedia

Mailing Address 333 108th Ave NE

City
BellevueState
WAZip Code
98004-5703

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664596

Amount of Each Disbursement this Period

91.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker Dr

City
ChicagoState
ILZip Code
60606-7147

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664607

Amount of Each Disbursement this Period

307.97

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664567

Amount of Each Disbursement this Period

7.52

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664577

Amount of Each Disbursement this Period

36.94

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664587

Amount of Each Disbursement this Period

5.98

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Expedia

Mailing Address 333 108th Ave NE

City
BellevueState
WAZip Code
98004-5703

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664597

Amount of Each Disbursement this Period

221.55

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2		2	0	2	4		

FEC Identification Number

C

Transaction ID : 500664568

Amount of Each Disbursement this Period

34.41

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2		2	0	2	4		

FEC Identification Number

C

Transaction ID : 500664578

Amount of Each Disbursement this Period

39.48

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2		2	0	2	4		

FEC Identification Number

C

Transaction ID : 500664588

Amount of Each Disbursement this Period

54.49

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. Renaissance Washington DC

Mailing Address 999 9th St NW

City
WashingtonState
DCZip Code
20001-4427

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664598

Amount of Each Disbursement this Period

528.43

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker Dr

City
ChicagoState
ILZip Code
60606-7147

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664609

Amount of Each Disbursement this Period

8.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. MCO Transfer

Mailing Address 359 Streamview Way

City
Winter SpringsState
FLZip Code
32708-6409

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664559

Amount of Each Disbursement this Period

170.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0										
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664569

Amount of Each Disbursement this Period

47.05

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664579

Amount of Each Disbursement this Period

47.89

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St
FI 4City
San FranciscoState
CAZip Code
94103-1355

Purpose of Disbursement

Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : 500664589

Amount of Each Disbursement this Period

14.39

☒ Memo Item *

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

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

0.00

9631.04

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

A. Derek Tran for CongressMailing Address 10441 Stanford Ave
Unit 395City
Garden GroveState
CAZip Code
92842-5222

Purpose of Disbursement

Contribution to Federal Committee

Candidate Name

TRAN, DEREK, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	2	4		

FEC Identification Number

C C00851790**Transaction ID : 500663692**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Janelle Bynum for CongressMailing Address 10121 SE Sunnyside Rd
Ste 300City
ClackamasState
ORZip Code
97015-5713

Purpose of Disbursement

Contribution to Federal Committee

Candidate Name

BYNUM, JANELLE, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify)

State: OR

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	2	4		

FEC Identification Number

C C00843425**Transaction ID : 500660985**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

4000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Center Aisle PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 16 / 2024

A. Cure Epilepsy

Mailing Address PO Box 10572

City
Chicago

State
IL

Zip Code
60610-0572

FEC Identification Number

C

Transaction ID : 500660720

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement

Charitable Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

☐ Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

Mailing Address

City

State

Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

☐ Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

Mailing Address

City

State

Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

☐ Memo Item

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

2500.00

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

2500.00