

# 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**  
**SYNERGY PAC**

ADDRESS (number and street) **185 Symphony Way**  
Check if different than previously reported. (ACC) **Centreville MD 21617**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00409623** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 **Feldman, Barry, , ,**

Signature of Treasurer **Feldman, Barry, , ,** Date  /  /

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

**SYNERGY 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="2026"/>		113310.33
(b) Cash on Hand at Beginning of Reporting Period.....	113459.99	
(c) Total Receipts (from Line 19) .....	205.53	8141.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	113665.52	121451.52
7. Total Disbursements (from Line 31).....	40209.09	47995.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	73456.43	73456.43
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

SYNERGY PAC

Report Covering the Period: From: MM / DD / YYYY 03 / 01 / 2026 To: MM / DD / YYYY 03 / 31 / 2026

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	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	7500.00
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	42.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	205.53	599.19
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)).....▶	205.53	8141.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	205.53	8141.19

**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 .....	7209.09	14995.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7209.09	14995.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33000.00	33000.00
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)) ..	40209.09	47995.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40209.09	47995.09

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	7500.00
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	7500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7209.09	14995.09
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	42.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7209.09	14953.09

**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 11
<input 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 checked="" 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)  
**SYNERGY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Vanguard Investments**

Mailing Address PO Box 3009

City Monroe State WI Zip Code 53566

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 ▼  
599.05

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2026  
**Transaction ID : SA17.10762**

Amount of Each Receipt this Period  
205.48

Memo Item

Dividend

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	205.48
<b>TOTAL</b> This Period (last page this line number only).....▶	205.48

**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

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)  
**SYNERGY PAC**

**A. Advanced Network Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 413 New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 12 / 2026

FEC Identification Number: C

Transaction ID : SB21B.10750

Amount of Each Disbursement this Period: 3800.00

Memo Item

**B. American Express**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 06106

Purpose of Disbursement  
Credit card payment - see below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 10 / 2026

FEC Identification Number: C

Transaction ID : SB21B.10757

Amount of Each Disbursement this Period: 2561.09

Memo Item

**C. American Legion Post #8**

Full Name (Last, First, Middle Initial)

Mailing Address 224 D Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Beverages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 11 / 2026

FEC Identification Number: C

Transaction ID : SB21B.10757

Amount of Each Disbursement this Period: 1380.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6361.09

**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

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)  
**SYNERGY PAC**

**A. Italian Store**

Full Name (Last, First, Middle Initial)

Mailing Address 3123 Lee Highway

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Food and beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2026

FEC Identification Number: C

Transaction ID : SB21B.10757

Amount of Each Disbursement this Period: 1046.99

Memo Item

**B. White, Adrian, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 19014 Mills Choice Road

City Montgomery Village State MD Zip Code 20886

Purpose of Disbursement  
Entertainment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 06 / 2026

FEC Identification Number: C

Transaction ID : SB21B.10757

Amount of Each Disbursement this Period: 205.90

Memo Item

**C. American Legion Post #8**

Full Name (Last, First, Middle Initial)

Mailing Address 224 D Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Correction of 2/11 charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 11 / 2026

FEC Identification Number: C

Transaction ID : SB21B.10757

Amount of Each Disbursement this Period: - 72.00

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 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

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)  
**SYNERGY PAC**

Full Name (Last, First, Middle Initial) <b>A. Feldman, Barry, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2026	
Mailing Address 185 Symphony Way		FEC Identification Number C [ ] <b>Transaction ID : SB21B.10746</b>	
City Centreville	State MD	Zip Code 21617	Amount of Each Disbursement this Period [ ] 750.00
Purpose of Disbursement PAC Management/Compliance: Fees		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
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>B. Perkins Coie LLP</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2026	
Mailing Address 1201 Third Ave. Ste. 4900		FEC Identification Number C [ ] <b>Transaction ID : SB21B.10747</b>	
City Seattle	State WA	Zip Code 98101	Amount of Each Disbursement this Period [ ] 38.00
Purpose of Disbursement Compliance advice		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
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>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 788.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 7149.09

**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

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)  
**SYNERGY PAC**

**A. CLEAVER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 4801 MAIN STREET, SUITE 1000

City KANSAS CITY State MO Zip Code 64112

Purpose of Disbursement  Contribution  Other (specify) \_\_\_\_\_

Candidate Name CLEAVER, EMANUEL II, , ,

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: MO District: 05

Date of Disbursement: 03 / 31 / 2026

FEC Identification Number: C00395848  
**Transaction ID : SB23.10754**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 SOUTH CAPITOL STREET, SE  
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  Contribution  Other (specify) \_\_\_\_\_

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: District:

Date of Disbursement: 03 / 04 / 2026

FEC Identification Number: C00000935  
**Transaction ID : SB23.10743**  
Amount of Each Disbursement this Period: 15000.00

Memo Item

**C. HALEY STEVENS FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address 33717 WOODWARD AVE  
#539

City BIRMINGHAM State MI Zip Code 48009

Purpose of Disbursement  Contribution  Other (specify) \_\_\_\_\_

Candidate Name STEVENS, HALEY, , ,

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: MI District: 11

Date of Disbursement: 03 / 31 / 2026

FEC Identification Number: C00903039  
**Transaction ID : SB23.10751**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 25000.00

**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

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)  
**SYNERGY PAC**

Full Name (Last, First, Middle Initial)

### A. MIKE THOMPSON FOR CONGRESS

Mailing Address 5445 MADISON AVENUE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement

Candidate Name  
STEVENS, HALEY, , ,

Office Sought:  House  
 Senate  
 President  
State: MI District: 11

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2026

FEC Identification Number

**C** C00326363

**Transaction ID : SB23.10755**

Amount of Each Disbursement this Period

3000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

### B. MIKE THOMPSON FOR CONGRESS

Mailing Address 5445 MADISON AVENUE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement

Candidate Name  
THOMPSON, MIKE MR., , ,

Office Sought:  House  
 Senate  
 President  
State: CA District: 01

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2026

FEC Identification Number

**C** C00326363

**Transaction ID : SB23.10756**

Amount of Each Disbursement this Period

5000.00
---------

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	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)..... ▶

8000.00
---------

33000.00
----------