

**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

CPAC ACTION PAC

ADDRESS (number and street)

1199 N FAIRFAX ST

SUITE 500

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00130658

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y Y

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

Type or Print Name of Treasurer

JOHNSON, MELODIE, , ,

Signature of Treasurer

JOHNSON, MELODIE, , ,

Date

M M /

D D /

Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

CPAC ACTION PAC

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
07 / 31 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2025		281717.25
(b) Cash on Hand at Beginning of Reporting Period.....	418317.73	
(c) Total Receipts (from Line 19)	95373.73	541886.47
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	513691.46	823603.72
7. Total Disbursements (from Line 31)	62608.82	372521.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	451082.64	451082.64
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

CPAC ACTION PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2025

To:

M M / D D / Y Y Y Y
07 31 2025**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).....

40490.00

202897.00

(ii) Unitemized

54883.73

338974.47

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

95373.73

541871.47

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

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

Totals to Line 33, page 5)

95373.73

541871.47

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

15.00

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))

95373.73

541886.47

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

95373.73

541886.47

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	62608.82	368521.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	62608.82	368521.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	4000.00
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)) ..	62608.82	372521.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	62608.82	372521.08

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)	95373.73	541871.47
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	95373.73	541871.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	62608.82	368521.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	62608.82	368521.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. ABBIATI, GEORGE, , MR, JR

Mailing Address 15 PORTER ST

City
QUAKER HILLState
CTZip Code
06375FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16289

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. ALLEN, HAROLD, , MR,

Mailing Address 713 WAKEFIELD CT

City
EL PASOState
TXZip Code
79922FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

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
07 / 15 / 2025

Transaction ID : SA11AI.16313

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. ALLSCHWAGER, LAUREN, D, MR,

Mailing Address 312 N 84TH PL

City
MESAState
AZZip Code
85207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2025

Transaction ID : SA11AI.16317

Amount of Each Receipt this Period

80.00

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

530.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 71
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. ARANOFF, ROBERT, , MR,

Mailing Address 834 FLANDERS R

City
DELRAY BEACHState
FLZip Code
33484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.16336

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. ARNOLD, TROY, , MR, JR

Mailing Address 301 HOLLYPORT RD

City
RICHMONDState
VAZip Code
23229FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2025

Transaction ID : SA11AI.16344

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. BACARDI, RUBY, M, MRS,

Mailing Address 5830 MAYNADA ST

City
CORAL GABLESState
FLZip Code
33146FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16354

Amount of Each Receipt this Period

250.00

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

600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. BARKAN, PEGGY, , MS,

Mailing Address 20 COUNTRY HILL LN

City
SMITHFIELDState
RIZip Code
02917FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2025

Transaction ID : SA11AI.16377

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. BARLOW, JUNE, , MRS,

Mailing Address 2525 MITCHELL BUTTE RD

City
NYSSAState
ORZip Code
97913FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.16382

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. BARNETT, CARL, WAYNE, MR,

Mailing Address PO BOX 202

City
BURLESONState
TXZip Code
76097FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.16383

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. BARNHART, NANCY, L, MRS,

Mailing Address 7370 WALSH RD

City
MILLINGTONState
TNZip Code
38053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2025

Transaction ID : SA11AI.16384

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. BATES, THOMAS, , MR,

Mailing Address 2661 VIRGINIA BEACH BLVD

City
VIRGINIA BEACHState
VAZip Code
23452FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RTROccupation (for Individual)
AUTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2025

Transaction ID : SA11AI.18396

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. BEDLAN, BETTY, JEAN, MRS,

Mailing Address 828 22ND ST APT 108

City
FAIRBURYState
NEZip Code
68352FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.16402

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 71
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. BEDLAN, BETTY, JEAN, MRS,

Mailing Address 828 22ND ST APT 108

City
FAIRBURYState
NEZip Code
68352FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2025

Transaction ID : SA11AI.16401

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. BIEBER, ALBERT, , MR,

Mailing Address PO BOX 207

City
CHINAState
TXZip Code
77613FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16434

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. BITTER, FRANK, GORDON, MR,

Mailing Address PO BOX 267

City
RYE BEACHState
NHZip Code
03871FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.16439

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

1400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. BITTLE, DARRELL, G, MR, USAF RET

Mailing Address 614 OVERBROOK DR

City
FORT WALTON BEACHState
FLZip Code
32547FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USAFOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.16440

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. BOGAARD, RICHARD, L, MR,

Mailing Address 2705 E TRANQUILITY PL

City
SIOUX FALLSState
SDZip Code
57108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 30 / 2025

Transaction ID : SA11AI.16451

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

C. BORNHEIMER, JIM, , ,

Mailing Address 911 SHERMAN PKWY

City
BELTONState
MOZip Code
64012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.16462

Amount of Each Receipt this Period

39.00

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

464.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. BRACKEN, KAY, , ,

Mailing Address 405 HAMVASSY LN

City
TYLERState
TXZip Code
75701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRACKEN INTERESTOccupation (for Individual)
OIL & GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.18417

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. BREWTON, POWELL, , MR,

Mailing Address 7637 RIVER CREST DR

City
COLUMBUSState
GAZip Code
31904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2025

Transaction ID : SA11AI.16502

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. BRILL, JOY, , ,

Mailing Address 13432 TILFORD CT

City
GERMANTOWNState
MDZip Code
20874FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMUNITY SUPPORT SERVICESOccupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.18394

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

115.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. BRINKERHOFF, BOB, C, MR,

Mailing Address 489 E 3RD AVE

City
SPRINGFIELDState
COZip Code
81073FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16511

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

B. CALFANO, ALBERT, J, MR,

Mailing Address 5 E PROSPECT ST

City
HOPEWELLState
NJZip Code
08525FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.16560

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. CASEY, WILLIAM, , MR,

Mailing Address 3 SEAL HARBOR RD PH 34

City
WINTHROPState
MAZip Code
02152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16593

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

310.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. CHARTER, JACK, , MR,

Mailing Address PO BOX 399

City
TENINOState
WAZip Code
98589FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16607

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. CHILES, RICHARD, , MR,

Mailing Address 4595 E HIGHWAY 20 APT 311

City
NICEVILLEState
FLZip Code
32578FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2025

Transaction ID : SA11AI.16617

Amount of Each Receipt this Period

260.00

☐ Memo Item
CONTRIBUTION

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

C. CLARK, THOMAS, L, MR,

Mailing Address 2735 S WAGNER RD UNIT 83

City
ANN ARBORState
MIZip Code
48103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2025

Transaction ID : SA11AI.16630

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

510.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. COGORNO, GARY, , MR,

Mailing Address 808 EMERALD BAY

City
LAGUNA BEACHState
CAZip Code
92651FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.18426

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. COLL, CHARLES, , MR,

Mailing Address 5207 S HUMMINGBIRD LN

City
ROSWELLState
NMZip Code
88202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2025

Transaction ID : SA11AI.16644

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. COUSINO, GLENN, R, MR,

Mailing Address 9466 HOUGHTON ST

City
LIVONIAState
MIZip Code
48150FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2025

Transaction ID : SA11AI.16670

Amount of Each Receipt this Period

150.00

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

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. COUSINO, GLENN, R, MR,

Mailing Address 9466 HOUGHTON ST

City
LIVONIAState
MIZip Code
48150FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.16671

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. DAILY, ROBERT, FISHER, MR,

Mailing Address 1127 E DEL MAR BLVD APT 214

City
PASADENAState
CAZip Code
91106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2025

Transaction ID : SA11AI.16700

Amount of Each Receipt this Period

182.00

☐ Memo Item
CONTRIBUTION

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

C. DAMRON, JENNIE, , ,

Mailing Address 4761 BEESON FARM RD

City
SOPHIAState
NCZip Code
27350FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

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
07 / 07 / 2025

Transaction ID : SA11AI.16706

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

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

782.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. DANIELS, ABRAHAM, , MR,

Mailing Address 45 CUTTERMILL RD STE 1

City
GREAT NECKState
NYZip Code
11021FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2025

Transaction ID : SA11AI.16707

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. DAVIS, PAMELA, E, MS,

Mailing Address 2506 NORTHBROOK DR

City
LONGVIEWState
TXZip Code
75605FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.16725

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. DE CESARE, CATHERINE, , MRS,

Mailing Address 59 LINDEN ST

City
MASSAPEQUAState
NYZip Code
11758FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.16732

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

650.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. DEMASTERS, BABALA, K, MRS,

Mailing Address 1180 VIA DI FELICITA

City
ENCINITASState
CAZip Code
92024FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2025

Transaction ID : SA11AI.16743

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. DE ROX, MARY, A, MS,

Mailing Address 267 MAPLE VIEW DR

City
WESTFIELDState
INZip Code
46074FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.16735

Amount of Each Receipt this Period

600.00

☐ Memo Item
CONTRIBUTION

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

C. DETERS, MERLIN, L, MRS,

Mailing Address 249 NORTH ST

City
BAILEYVILLEState
KSZip Code
66404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.16744

Amount of Each Receipt this Period

200.00

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

1050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. DIONNE, DOUGLAS, P, MR,

Mailing Address 6122 WINDY KNL

City
WINDCRESTState
TXZip Code
78239FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2025

Transaction ID : SA11AI.16751

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. DORR, RAYMOND, H, MR,

Mailing Address 208 N MISSOURI ST

City
CHILHOWEEState
MOZip Code
64733FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.16759

Amount of Each Receipt this Period

39.00

☐ Memo Item
CONTRIBUTION

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

C. DOUGLASS, DONALD, , MR,

Mailing Address 8961 LAKE DR APT 306

City
CAPE CANAVERALState
FLZip Code
32920FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16762

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

189.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. DUTCHER, KATHERINE, , ,

Mailing Address 815 W 3RD ST

City
NORTH LOUPState
NEZip Code
68859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.16780

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

B. ELLESTAD, BOYD, A, MR,

Mailing Address 30508 SANTA LUNA DR

City
RANCHO PALOS VERDESState
CAZip Code
90275FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16799

Amount of Each Receipt this Period

225.00

☐ Memo Item
CONTRIBUTION

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

C. ELLSWORTH, ED, , MR,

Mailing Address 14139 HIDDEN SPRINGS LN

City
MORGAN HILLState
CAZip Code
95037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2025

Transaction ID : SA11AI.16808

Amount of Each Receipt this Period

200.00

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

725.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. ERML, JANET, R, MRS,

Mailing Address 2154 DOVER CENTER RD APT 217

City
WESTLAKEState
OHZip Code
44145FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 08 / 2025

Transaction ID : SA11AI.16815

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. FORDERER, RICHARD, , MR,

Mailing Address 1729 N 19TH ST

City
BISMARCKState
NDZip Code
58501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.16868

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

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

C. FRAKER, DEAN, A, MR,

Mailing Address 1295 W COOK RD

City
MANSFIELDState
OHZip Code
44906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 02 / 2025

Transaction ID : SA11AI.16871

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

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

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

192.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 71
(check only one)

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. FRAKER, DEAN, A, MR,

Mailing Address 1295 W COOK RD

City
MANSFIELDState
OHZip Code
44906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.16873

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

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

B. FRAKER, DEAN, A, MR,

Mailing Address 1295 W COOK RD

City
MANSFIELDState
OHZip Code
44906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.16872

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

C. FRUENDT, DONALD, F, MR,

Mailing Address 821 N 2803RD RD

City
UTICAState
ILZip Code
61373FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16881

Amount of Each Receipt this Period

50.00

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

177.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. GRIMMER, KATHLEEN, , ,

Mailing Address 14375 VIOLET CIR

City
CEDAR LAKEState
INZip Code
46303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.16965

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. GRIMMER, KATHLEEN, , ,

Mailing Address 14375 VIOLET CIR

City
CEDAR LAKEState
INZip Code
46303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.16966

Amount of Each Receipt this Period

84.00

☐ Memo Item
CONTRIBUTION

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

C. HALL, CHARLES, A, MR,

Mailing Address 19 ROLLING RIDGE RD

City
WHITE PLAINSState
NYZip Code
10605FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.16993

Amount of Each Receipt this Period

250.00

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

384.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 71
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. HAMANAKA, BARBARA, A, MS,

Mailing Address 40 EAGLE RIDGE DR

City
GALES FERRYState
CTZip Code
96335FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17000

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. HAMBEK, JEFFREY, L, MR,

Mailing Address 5304 S TOMAR RD

City
SIOUX FALLSState
SDZip Code
57108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 29 / 2025

Transaction ID : SA11AI.17001

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. HAMMER, GREG, S, MR,

Mailing Address 914 SUTTON DR

City
XENIAState
OHZip Code
45385FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.17008

Amount of Each Receipt this Period

125.00

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

475.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. HARMAN, ROBERT, A, MR,

Mailing Address 3923 PALLADIUM LAKE DR

City
BOYNTON BEACHState
FLZip Code
33436FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.17020

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

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

B. HARMAN, ROBERT, A, MR,

Mailing Address 3923 PALLADIUM LAKE DR

City
BOYNTON BEACHState
FLZip Code
33436FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17021

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. HARRIS, MICHELLE, M, MRS,

Mailing Address 9070 W 94TH AVE

City
WESTMINSTERState
COZip Code
80021FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVAYAOccupation (for Individual)
SYSTEMS APPL SPEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.17024

Amount of Each Receipt this Period

200.00

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

352.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. HEDGES, CHARLES, F, MR,

Mailing Address 13009 S DART RD

City
MOLALLAState
ORZip Code
97038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17058

Amount of Each Receipt this Period

104.00

☐ Memo Item
CONTRIBUTION

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

B. HICKS, ROGER, F, MR,

Mailing Address PO BOX 18169

City
OKLAHOMA CITYState
OKZip Code
73154FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROGER HICKS & ASSOCOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17083

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. HOOPER, THOMAS, D, MR,

Mailing Address 2404 FREY AVE

City
VENICEState
CAZip Code
90291FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.17118

Amount of Each Receipt this Period

35.00

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

389.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. HOPKINS, MARK, T, MR,

Mailing Address 3043 S ROBERTSON RD

City
CASPERState
WYZip Code
82604FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.17121

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. HUMPHRIES, BARRY, K, MR,

Mailing Address 4445 GULF PINES DR

City
SANIBELState
FLZip Code
33957FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17143

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. INGRAHAM, MARGARET, A, MRS,

Mailing Address 420 N ALMANSOR ST

City
ALHAMBRAState
CAZip Code
91801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.17154

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

585.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. IVERSON, CONNIE, M, ,

Mailing Address 7243 PRINCETON AVE

City
LA MESAState
CAZip Code
91942FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17159

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. JARAMILLO, EPIFANIO, R, MR,

Mailing Address 156 FOREST RIDGE DR

City
BRANDONState
MSZip Code
39042FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2025

Transaction ID : SA11AI.17165

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. KAUFMANN, BARBARA, A, MS,

Mailing Address 465 QUARRY HILL RD APT 117

City
SOUTH BURLINGTONState
VTZip Code
05403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17228

Amount of Each Receipt this Period

300.00

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

450.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. KENDALL, SIGURD, S, ,

Mailing Address 9406 MONTICELLO DR

City
GRANBURYState
TXZip Code
76049FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.17238

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. KIESER, BARBARA, N, MRS,

Mailing Address 603 MOUNTAIN AVE APT 539

City
NEW PROVIDENCEState
NJZip Code
97974FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

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
07 / 01 / 2025

Transaction ID : SA11AI.17247

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

C. KRAPF, DALLAS, L, MR,

Mailing Address 407 JACOBS CT

City
EXTONState
PAZip Code
19341FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
KRAPF BUS COMPANIESOccupation (for Individual)
BUS TRANSPORT

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
07 / 11 / 2025

Transaction ID : SA11AI.17304

Amount of Each Receipt this Period

500.00

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

1100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. LAHEY, BRUCE, E, MR,

Mailing Address 6 BROADWAY

City
SMITHTOWNState
NYZip Code
11787FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 08 / 2025

Transaction ID : SA11AI.17319

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. LEMMO, ALFRED, , MR,

Mailing Address 21713 SNOW AVE

City
DEARBORNState
MIZip Code
48124FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.17355

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. LIMMER, BOBBY, , DR,

Mailing Address 1263 COUNTY ROAD 102

City
LLANOState
TXZip Code
78643FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.17371

Amount of Each Receipt this Period

250.00

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

1350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. LINDVIG, MILTON, , MR,

Mailing Address 2610 ASTRONAUT DR

City
BISMARCKState
NDZip Code
58503FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.17379

Amount of Each Receipt this Period

56.00

☐ Memo Item
CONTRIBUTION

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

B. LINDVIG, MILTON, , MR,

Mailing Address 2610 ASTRONAUT DR

City
BISMARCKState
NDZip Code
58503FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.17380

Amount of Each Receipt this Period

84.00

☐ Memo Item
CONTRIBUTION

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

C. LOUWAGIE, JOSEPH, H, MR,

Mailing Address 2277 MAURITANIA RD

City
PUNTA GORDAState
FLZip Code
33983FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.17393

Amount of Each Receipt this Period

150.00

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

290.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. LOVELACE, FRANCES, L, MS,

Mailing Address 3217 CHICAGO ST SE

City
ALBANYState
ORZip Code
97322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.17396

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. LYON, YVONNE, M, MRS,

Mailing Address 3025 LEPRECHAUN LN

City
PALM HARBORState
FLZip Code
34683FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.17406

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. MACKLEN, PATRICIA, , ,

Mailing Address 293 HAWTHORN DR

City
PAWLEYS ISLANDState
SCZip Code
29585FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

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
07 / 15 / 2025

Transaction ID : SA11AI.17409

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. MADDOX, REBECCA, G, MS,

Mailing Address 3906 BEACONSDALE DR

City
AUSTINState
TXZip Code
78727FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17416

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. MARSHALL, PAULA, , ,

Mailing Address PO BOX 4829

City
TULSAState
OKZip Code
74159FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAMAOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2025

Transaction ID : SA11AI.18431

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. MAYFIELD, D, DALE, MR,

Mailing Address PO BOX 261

City
WATAGAState
ILZip Code
61488FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.17446

Amount of Each Receipt this Period

39.00

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

389.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. MCADAMS, ANDREA, , ,

Mailing Address 601 PENFIELD AVE

City
HAVERTOWNState
PAZip Code
19083FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIGHTHOUSE COMM L INSURANCEOccupation (for Individual)
ACCOUNT EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2025

Transaction ID : SA11AI.18391

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. MCCORMICK, CHARLES, O, MR, III

Mailing Address 7881 CLEARWATER COVE DR

City
INDIANAPOLISState
INZip Code
46240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INDIANA EYE CLINICOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17466

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. MCGREGOR, BYRON, C, MR,

Mailing Address 521 CRYSTAL CIR

City
MANKATOState
MNZip Code
56001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.17480

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. MCLACHLIN, DONALD, , ,

Mailing Address 7951 CONDIT RD

City
HOMERState
MIZip Code
49245FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.17481

Amount of Each Receipt this Period

102.00

☐ Memo Item
CONTRIBUTION

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

B. MCLEAN, KATHLEEN, T G, MRS, III

Mailing Address 5132 TWINMEADOWS DR

City
MEMPHISState
TNZip Code
38134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.17483

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. MCLELLEN, MICHAEL, , MR,

Mailing Address 4925 WEATHERSTONE LN SE

City
KENTWOODState
MIZip Code
49508FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2025

Transaction ID : SA11AI.18409

Amount of Each Receipt this Period

50.00

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

402.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. MEYER, MATTHEW, A, MR,

Mailing Address 2932 NATHANIELS RUN

City
WILLIAMSBURGState
VAZip Code
23185FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.17507

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. MIDDLETON, GERI, , MISS,

Mailing Address 140 S DOLLIVER ST SPC 106

City
PISMO BEACHState
CAZip Code
93449FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 09 / 2025

Transaction ID : SA11AI.17513

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

C. MILLS, MINA, C, ,

Mailing Address 4 KING HENRY CIR

City
ROSEDALEState
MDZip Code
21237FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17527

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

5350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. MONTAGUE, CHARLES, IVAN, MR, JR

Mailing Address 22765 ACKLEY RD

City
BELLEVUEState
MIZip Code
49021FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17538

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. MONTAGUE, CHARLES, IVAN, MR, JR

Mailing Address 22765 ACKLEY RD

City
BELLEVUEState
MIZip Code
49021FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.17537

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. MORALES, MIGUEL, , MR,

Mailing Address 513 BURNS DR

City
KILL DEVIL HILLSState
NCZip Code
27948FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MORALESOccupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.18398

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

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

235.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. MOYLE, JUDITH, , MS,

Mailing Address PO BOX 520800

City
SALT LAKE CITYState
UTZip Code
84152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2025

Transaction ID : SA11AI.17562

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. MURPHY, JEFF, , ,

Mailing Address 6085 TIMBERIDGE

City
PARKVILLEState
MOZip Code
64152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2025

Transaction ID : SA11AI.18413

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. MYERS, GERALD, , MR,

Mailing Address 1326 SW LOOKING GLASS LOOP

City
OAK HARBORState
WAZip Code
98277FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.17588

Amount of Each Receipt this Period

390.00

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

675.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. NEUMANN, MARY, BETH, ,

Mailing Address 2458 GROVE PARK RD

City
FENTONState
MIZip Code
48430FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2025

Transaction ID : SA11AI.18408

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. NIEMANN, NANCY, A, ,

Mailing Address 18 DOGWOOD RD

City
MORRIS PLAINSState
NJZip Code
07950FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2175.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17604

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. OBENSHAIN, ROBERT, L, MR,

Mailing Address 6890 HANESBROOK CIR

City
CLEMMONSState
NCZip Code
27012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.17618

Amount of Each Receipt this Period

75.00

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

1125.00

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

PAGE 40 OF 71

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

CPAC ACTION PAC

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

A. OTTUM, DAVID, A, MR,

Mailing Address N2532 COUNTY ROAD C

City
DARIENState
WIZip Code
53114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.17644

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

B. PACK, SAM, , ,

Mailing Address 24 BRAEWOOD PL

City
DALLASState
TXZip Code
75248FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

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 / 14 / 2025

Transaction ID : SA11AI.17650

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. PALERMO, MARK, , MR,

Mailing Address 246 GARFIELD PL

City
BROOKLYNState
NYZip Code
11215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
LAWYER/CONSULTANT/INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.18389

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

1125.00

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

PAGE 41 OF 71

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

CPAC ACTION PAC

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

A. PARSONS, JOHN, M, MR,

Mailing Address 475 REGENCY BLVD

City
SHREVEPORTState
LAZip Code
71106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17662

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. PETTYJOHN, KAREN, E, MISS,

Mailing Address 828 DRESSER DR

City
ANDERSONState
INZip Code
46011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17694

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. PHILP, BARBARA, J, MS,

Mailing Address 212 PRITCHARD DR

City
PALM COASTState
FLZip Code
32164FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.17702

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

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

420.00

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

PAGE 42 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. PHILP, BARBARA, J, MS,

Mailing Address 212 PRITCHARD DR

City
PALM COASTState
FLZip Code
32164FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.17703

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. QUINN, ROBERT, , ,

Mailing Address 661 IVYWOOD DR

City
OXNARDState
CAZip Code
93030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.17743

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

C. RATH, DAVID, , MR,

Mailing Address 3852 PINE AVE

City
LONG BEACHState
CAZip Code
90807FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.17760

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

460.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. ROGERS, C, B, MR, JR

Mailing Address 381 INDIAN HARBOR RD

City
VERO BEACHState
FLZip Code
32963FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2025

Transaction ID : SA11AI.17814

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. ROGERS, C, B, MR, JR

Mailing Address 381 INDIAN HARBOR RD

City
VERO BEACHState
FLZip Code
32963FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2025

Transaction ID : SA11AI.17815

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

C. SAND, HOWARD, J, MR,

Mailing Address 2929 76TH AVE SE APT 103

City
MERCER ISLANDState
WAZip Code
98040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2025

Transaction ID : SA11AI.17851

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

700.00

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

PAGE 44 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. SANFORD, ROBERT, , MR,

Mailing Address 344 LAZY S RANCH RD

City
GUNTERState
TXZip Code
75058FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.17855

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. SCARBOROUGH, THERON, , MR,

Mailing Address 4416 182ND LN SW

City
ROCHESTERState
WAZip Code
98579FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.17869

Amount of Each Receipt this Period

120.00

☐ Memo Item
CONTRIBUTION

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

C. SCHALL, JAMES, E, DR,

Mailing Address 415 MIFFLIN ST

City
HUNTINGDONState
PAZip Code
16652FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
JAMES E VAN ZANDT VAMCOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17871

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

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

1320.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. SCHALL, JAMES, E, DR,

Mailing Address 415 MIFFLIN ST

City
HUNTINGDONState
PAZip Code
16652FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JAMES E VAN ZANDT VAMCOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2575.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17872

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

B. SCHELIGA, GERARD, , MR,

Mailing Address 259 GOLDENROD DR

City
UPPER GWYNEDDState
PAZip Code
19446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.17873

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

C. SCHULTZ, ROCKY, C, MR,

Mailing Address 305 LORENE CT

City
RED OAKState
TXZip Code
75154FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17891

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

900.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. SCHULTZ, WILLIAM, RICHARD, MR,

Mailing Address 831 RORKE WAY

City
PALO ALTOState
CAZip Code
94303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17893

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

B. SCHWEINSHAUT, KURT, , MR,

Mailing Address 15 ANGELA WAY

City
WEST BARNSTABLEState
MAZip Code
02668FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

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
07 / 16 / 2025

Transaction ID : SA11AI.17898

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. SCOTT, AUDREY, M, MRS,

Mailing Address 9778 SW COQUILLE CT

City
TUALATINState
ORZip Code
97062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17905

Amount of Each Receipt this Period

50.00

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

700.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 71
(check only one)

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. SCOTT, RODGER, C, MR,

Mailing Address 20405 SE 344TH ST

City
AUBURNState
WAZip Code
98092FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17906

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. SEASTRAND, EDWARD, E, MR,

Mailing Address PO BOX 683

City
CROSSVILLEState
TNZip Code
38557FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.17914

Amount of Each Receipt this Period

222.00

☐ Memo Item
CONTRIBUTION

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

C. SECKINGER, TROY, , MR,

Mailing Address 329 ROBIN CT

City
BURLESONState
TXZip Code
76028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 30 / 2025

Transaction ID : SA11AI.17919

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

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

822.00

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

PAGE 48 OF 71

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

CPAC ACTION PAC

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

A. SHAW, JOHN, A, MR,

Mailing Address 3628 MARCO CT

City
EMPORIAState
KSZip Code
66801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.17957

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

B. SHELNUTT, TRACY, , ,

Mailing Address 8944 EPHEBUS CHURCH RD

City
VILLA RICAState
GAZip Code
30180FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2025

Transaction ID : SA11AI.18400

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

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

C. SHERRILL, BARBARA, B, MRS,

Mailing Address 233 PROSPECT ST APT N206

City
LA JOLLAState
CAZip Code
92037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.17963

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

385.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. SIDES, VICTORIA, , ,

Mailing Address 9034 PALLADIUM PL

City
LAKE WORTHState
FLZip Code
33467FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

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
07 / 11 / 2025

Transaction ID : SA11AI.17974

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

B. SIGLER, ROBERT, W, MR,

Mailing Address 8070 FRANKFORD RD APT 221

City
DALLASState
TXZip Code
75252FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.17976

Amount of Each Receipt this Period

350.00

☐ Memo Item
CONTRIBUTION

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

C. SLIMAN, MARY, , MS,

Mailing Address 329 OAKRIDGE CIR

City
BILOXIState
MSZip Code
39531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.17990

Amount of Each Receipt this Period

250.00

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

1000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. SLINDE, GARY, A, MR,

Mailing Address 3120 LOCKER RD SE

City
PORT ORCHARDState
WAZip Code
98366FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.17993

Amount of Each Receipt this Period

850.00

☐ Memo Item
CONTRIBUTION

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

B. SLINDE, GARY, A, MR,

Mailing Address 3120 LOCKER RD SE

City
PORT ORCHARDState
WAZip Code
98366FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.17992

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

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

C. SOUTHERN, DEL, F, MR,

Mailing Address 11026 W SCHOOL RD

City
LATHAMState
ILZip Code
62543FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.18025

Amount of Each Receipt this Period

250.00

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

1152.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 51 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. STARCHER, RAY, A, MR,

Mailing Address 3280 GRANVIEW RD

City
GRANVILLEState
OHZip Code
43023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2025

Transaction ID : SA11AI.18042

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

B. STEWART, JOSEPH, C, MR, JR

Mailing Address 750 S HANLEY RD APT 230

City
SAINT LOUISState
MOZip Code
63105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11AI.18069

Amount of Each Receipt this Period

126.00

☐ Memo Item
CONTRIBUTION

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

C. STIGLITZ, MARILYN, , MS,

Mailing Address 232 BALTUSROL WAY

City
SPRINGFIELDState
NJZip Code
97081FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

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 / 07 / 2025

Transaction ID : SA11AI.18072

Amount of Each Receipt this Period

1000.00

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

1526.00

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

PAGE 52 OF 71

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

CPAC ACTION PAC

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

A. STRAIN, JAMES, , MR,

Mailing Address 4025 SUGAR HILL RD

City
RENOState
TXZip Code
75462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 29 / 2025

Transaction ID : SA11AI.18087

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. STRUZINSKY, EDWARD, J, MR,

Mailing Address 45 DORCHESTER LN

City
BRANFORDState
CTZip Code
06405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.18090

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. SUPPLEE, JAMES, F, MR,

Mailing Address 6880 LEETOWN RD

City
KEARNEYSVILLEState
WVZip Code
25430FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.18105

Amount of Each Receipt this Period

1000.00

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

1125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. THOMPSON, SHIRLEY, E, ,

Mailing Address 3900 S TERRY AVE APT 106

City
SIOUX FALLSState
SDZip Code
57106FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18152

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. TOHANNIE, NORA, , ,

Mailing Address PO BOX 370

City
TONALEAState
AZZip Code
86044FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2025

Transaction ID : SA11AI.18162

Amount of Each Receipt this Period

43.00

☐ Memo Item
CONTRIBUTION

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

C. TOMNITZ, SHARON, , ,

Mailing Address PO BOX 4648

City
HORSESHOE BAYState
TXZip Code
78657FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2025

Transaction ID : SA11AI.18419

Amount of Each Receipt this Period

35.00

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

228.00

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

PAGE 54 OF 71

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

CPAC ACTION PAC

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

A. URQUHART, N, SCOTT, MR,

Mailing Address 2862 COMMONS CIR APT B

City
GRAND JUNCTIONState
COZip Code
81506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18206

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. VANDEVERE, SHIRLEY, A, MRS,

Mailing Address 3201 CORMANY RD UNIT 3

City
COVENTRY TOWNSHIPState
OHZip Code
44319FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.18213

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. VANTUNO, DIANE, , MS,

Mailing Address 48 WALKER RD

City
WEST ORANGEState
NJZip Code
97052FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.18215

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

450.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. VAUGHN, JAMES, L, MR,

Mailing Address 638 W UNION RD NE

City
CALHOUNState
GAZip Code
30701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.18219

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. VESTER-HAWTHORNE, CLAUDIA, S, MAJ, USA RET

Mailing Address 39 VALLEY DR

City
ANNVILLEState
PAZip Code
17003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US ARMYOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2078.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18223

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

C. VOGES, JOAN, E, MR,

Mailing Address 11113 OBST RD

City
RED BUDState
ILZip Code
62278FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2025

Transaction ID : SA11AI.18228

Amount of Each Receipt this Period

500.00

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

950.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 56 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. VOWELL, BELITA, , MS,

Mailing Address 508 GRASSMEADE CV

City
CORDOVAState
TNZip Code
38018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.18232

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. WAITE, NORMAN, , MR, JR

Mailing Address PO BOX 5360

City
AVONState
COZip Code
81620FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2025

Transaction ID : SA11AI.18240

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. WALKOVIK, WILLIAM, T, MR,

Mailing Address 8020 FRONT NINE LN

City
NAVASOTAState
TXZip Code
77868FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18246

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

1550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 71
(check only one)

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. WALL, IRENE, B, MRS,

Mailing Address 119 SHAWNEE TRL

City
PRUDENVILLEState
MIZip Code
48651FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18249

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. WALSH, TOMASINA, , ,

Mailing Address 90 ISLAND PKWY

City
ISLAND PARKState
NYZip Code
11558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 08 / 2025

Transaction ID : SA11AI.18390

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. WEINRICH, LINDA, T, MRS,

Mailing Address 4380 PASADENA CIR

City
SARASOTAState
FLZip Code
34233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.18273

Amount of Each Receipt this Period

260.00

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

560.00

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

PAGE 58 OF 71

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

CPAC ACTION PAC

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

A. WEISKOPF, JEROME, , MR,

Mailing Address 11127 ABBOTSFORD PL

City
BELVIDEREState
ILZip Code
61008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.18277

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. WHEELER, JULIETTE, R, MRS,

Mailing Address 101 AVONBROOK RD

City
WALLINGFORDState
PAZip Code
19086FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2025

Transaction ID : SA11AI.18289

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

C. WILLIAMS, MICHAEL, R, MR,

Mailing Address 200 W CROSS ST

City
DONGOLAState
ILZip Code
62926FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.18319

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

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

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 59 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. WINFREE, JAMES, HAMILTON, MR,

Mailing Address 354 BAKER ST

City
KILGOREState
TXZip Code
75662FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
TREE FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.18328

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. WINN, DENA, , MRS,

Mailing Address 827 NE DEVON DR

City
LEES SUMMITState
MOZip Code
64064FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18329

Amount of Each Receipt this Period

222.00

☐ Memo Item
CONTRIBUTION

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

C. WOODRUFF, PIERS, , MR,

Mailing Address PO BOX 503

City
SOMERSETState
VAZip Code
22972FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18345

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

572.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 60 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. WU, HARRIET, , ,

Mailing Address 501 PORTOLA RD APT 8031

City
PORTOLA VALLEYState
CAZip Code
94028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA11AI.18356

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. WU, HARRIET, , ,

Mailing Address 501 PORTOLA RD APT 8031

City
PORTOLA VALLEYState
CAZip Code
94028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.18355

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. YOUNG, SARA, , MS,

Mailing Address 824 LAKEVIEW DR APT 106A

City
PARKERSBURGState
WVZip Code
26104FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.18364

Amount of Each Receipt this Period

105.00

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

305.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 61 OF 71
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

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

A. ZANAKIS, MICHAEL, , MR,

Mailing Address 8032 PLANTATION LAKES DR

City
PORT SAINT LUCIEState
FLZip Code
34986FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18374

Amount of Each Receipt this Period

220.00

☐ Memo Item
CONTRIBUTION

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

B. ZERR, JOHN, C, MR, JR

Mailing Address PO BOX 184

City
GEIGERTOWNState
PAZip Code
19523FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18379

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

C. ZICK, ALFORD, E, MR, JR

Mailing Address 11 ROLLING HILLS DR

City
BARRINGTONState
ILZip Code
60010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.18380

Amount of Each Receipt this Period

50.00

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

345.00

40490.00

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

PAGE 62 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 07 / 2025

FEC Identification Number

C

Transaction ID : SB21B.16265

Amount of Each Disbursement this Period

3.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 08 / 2025

FEC Identification Number

C

Transaction ID : SB21B.16260

Amount of Each Disbursement this Period

1.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 09 / 2025

FEC Identification Number

C

Transaction ID : SB21B.16267

Amount of Each Disbursement this Period

5.60

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

10.70

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

PAGE 63 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.16269

Amount of Each Disbursement this Period

 8.80☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.16271

Amount of Each Disbursement this Period

 15.70☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.16271

Amount of Each Disbursement this Period

 13.12☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 37.62

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

PAGE 64 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	5		

FEC Identification Number

C Transaction ID : SB21B.16264

Amount of Each Disbursement this Period

2.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	5		

FEC Identification Number

C Transaction ID : SB21B.16262

Amount of Each Disbursement this Period

2.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

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

FEC Identification Number

C Transaction ID : SB21B.16255

Amount of Each Disbursement this Period

1.60

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

6.60

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

PAGE 65 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	3			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.16263

Amount of Each Disbursement this Period

2.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.16261

Amount of Each Disbursement this Period

2.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.16266

Amount of Each Disbursement this Period

5.80

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

10.40

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

PAGE 66 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.16266

Amount of Each Disbursement this Period

 3.60☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BANKCARD USAMailing Address 2625 TOWNSGATE RD
STE 100City
WESTLAKE VILLAGEState
CAZip Code
91361Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.16279

Amount of Each Disbursement this Period

 553.33☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITAL CAGING CORPORATION

Mailing Address 504 SHAW RD STE 217

City
STERLINGState
VAZip Code
20166Purpose of Disbursement
BATCHING/CAGING SERVICES

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.16272

Amount of Each Disbursement this Period

 978.38☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 1535.31

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

PAGE 67 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445 A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

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
0	7			0	1			2	0	2	5		

FEC Identification Number

C**Transaction ID : SB21B.18432**

Amount of Each Disbursement this Period

48.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT SUPPORT SERVICESMailing Address 1155 - 15TH ST NW
STE 410City
WASHINGTONState
DCZip Code
20005

Purpose of Disbursement

POSTAGE

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
0	7			0	3			2	0	2	5		

FEC Identification Number

C**Transaction ID : SB21B.16274**

Amount of Each Disbursement this Period

31478.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT SUPPORT SERVICESMailing Address 1155 - 15TH ST NW
STE 410City
WASHINGTONState
DCZip Code
20005

Purpose of Disbursement

POSTAGE

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
0	7			1	7			2	0	2	5		

FEC Identification Number

C**Transaction ID : SB21B.16274**

Amount of Each Disbursement this Period

3638.82

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

35165.62

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 PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. DIRECT SUPPORT SYSTEMS INCMailing Address 3900 JERMANTOWN RD
STE 300City
FAIRFAXState
VAZip Code
22030

Purpose of Disbursement

DATABASE MANAGEMENT SERVICES

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	7			2	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.16275

Amount of Each Disbursement this Period

434.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City
ARLINGTONState
VAZip Code
22207

Purpose of Disbursement

DIRECT MAIL EXPENSE

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	7			0	3			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.16276

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City
FAIRFAXState
VAZip Code
22030

Purpose of Disbursement

BANK FEE

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	7			0	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.16278

Amount of Each Disbursement this Period

200.15

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

1034.48

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

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

PAGE 69 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. FORTWRIGHT STRATEGY INCMailing Address 1155 - 15TJ ST NW
STE 410City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
ESCROW SERVICES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 24 2025

FEC Identification Number

C Transaction ID : SB21B.16280

Amount of Each Disbursement this Period

3734.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTEGRAM

Mailing Address 22695 COMMERCE CENTER CT

City
DULLESState
VAZip Code
20166Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 03 2025

FEC Identification Number

C Transaction ID : SB21B.16281

Amount of Each Disbursement this Period

6300.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SUBSCRIPTION

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 14 2025

FEC Identification Number

C Transaction ID : SB21B.18434

Amount of Each Disbursement this Period

99.00

☐ Memo Item

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

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

10134.03

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

PAGE 70 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. MADERA ESCROW LLCMailing Address 1155 15TH ST NW
STE 410City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
ESCROW SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 10 / 2025

FEC Identification Number

C

Transaction ID : SB21B.16283

Amount of Each Disbursement this Period

390.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PLANET DIRECT INC

Mailing Address 11050 CHALLENGER CT

City
MANASSASState
VAZip Code
20109Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 03 / 2025

FEC Identification Number

C

Transaction ID : SB21B.16284

Amount of Each Disbursement this Period

2400.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PLANET DIRECT INC

Mailing Address 11050 CHALLENGER CT

City
MANASSASState
VAZip Code
20109Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 17 / 2025

FEC Identification Number

C

Transaction ID : SB21B.16285

Amount of Each Disbursement this Period

9834.13

☐ Memo Item

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

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

12625.12

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

PAGE 71 OF 71

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

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NAME OF COMMITTEE (In Full)

CPAC ACTION PAC

Full Name (Last, First, Middle Initial)

A. THE COMPLIANCE CONSULTING COMPANY OF VIRGINIA LLC

Mailing Address PO BOX 365

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
COMPLIANCE CONSULTING
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 15 / 2025

FEC Identification Number

C**Transaction ID : SB21B.18435**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

2000.00

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

62559.88