

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 DMFI PAC

ADDRESS (number and street) 1023 31st Street, NW Suite 530 Washington DC 20007 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00710848 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special Election on: 05/03/2022 in the State of OH

5. Covering Period 04/01/2022 through 04/13/2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Petterson, Jay, , , Type or Print Name of Treasurer

Signature of Treasurer Petterson, Jay, , , [Electronically Filed] Date 04/21/2022

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**DMFI PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="573277.55"/>	<input type="text" value="573277.55"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3330486.44"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="527311.00"/>	<input type="text" value="3452241.82"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3857797.44"/>	<input type="text" value="4025519.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="71775.02"/>	<input type="text" value="239496.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3786022.42"/>	<input type="text" value="3786022.42"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="133779.97"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**DMFI PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7250.00	95596.00
(ii) Unitemized .....	61.00	6645.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7311.00	102241.82
(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) .....	7311.00	102241.82
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.).....	520000.00	3350000.00
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)).....▶	527311.00	3452241.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	527311.00	3452241.82

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3051.82	28013.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3051.82	28013.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	54000.00
24. Independent Expenditures (use Schedule E) .....	62429.10	74429.10
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).....	6294.10	83054.29
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)) ..	71775.02	239496.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71775.02	239496.95

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7311.00	102241.82
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7311.00	102241.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3051.82	28013.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3051.82	28013.56

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Goldman, Stuart, , ,</b>			Date of Receipt MM / DD / YYYY 04 / 09 / 2022
Mailing Address 6005 Stuart Ave			<b>Transaction ID : VVC9XRZJQQ7</b>
City Baltimore	State MD	Zip Code 21209-4019	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed		Occupation (for Individual) Podiatrist	* Earmarked Contribution: See Below
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ACTBLUE</b>			Date of Receipt MM / DD / YYYY 04 / 10 / 2022
Mailing Address PO Box 441146			<b>Transaction ID : VVC9XRZJQQ7E</b>
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C C00401224			<input checked="" type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed		Occupation (for Individual) Conduit total listed in Agg. field	Note: Above Contribution earmarked through this organization.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7311.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Nacht, David, , ,</b>			Date of Receipt MM / DD / YYYY 04 / 03 / 2022
Mailing Address 2533 N Wagner Rd			<b>Transaction ID : VVC9XRZJQJ7</b>
City Ann Arbor	State MI	Zip Code 48103-1759	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Nacht Law PC		Occupation (for Individual) Attorney	* Earmarked Contribution: See Below
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7311.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2022

**Transaction ID : VVC9XRZJQJ7E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Roberts, Philip, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1808 Nob Hill Ave N

City Seattle	State WA	Zip Code 98109-2846
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
Ryan Swanson & Cleveland PLLC Attorney

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  
04 / 07 / 2022

**Transaction ID : VVC9XRZJQY2**

Amount of Each Receipt this Period  
1000.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
7311.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2022

**Transaction ID : VVC9XRZJQY2E**

Amount of Each Receipt this Period  
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Viterbi, Audrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 910409  
 City San Diego State CA Zip Code 92191-0409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 03 / 2022  
**Transaction ID : VVC9XRZJ201**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7311.00

Date of Receipt 04 / 03 / 2022  
**Transaction ID : VVC9XRZJ201E**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Younger, Joel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 420 Semple Ave  
 City Aptos State CA Zip Code 95003-5239  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 10 / 2022  
**Transaction ID : VVC9XRZJQP9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 9 OF 18
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7311.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 10 / 2022

**Transaction ID : VVC9XRZJQP9E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	7250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Heller, David, , ,</b>			Date of Receipt MM / DD / YYYY 04 / 10 / 2022
Mailing Address 2165 E Maya Palm Dr			<b>Transaction ID : VVC9XRZJQX4</b>
City Boca Raton	State FL	Zip Code 33432-7950	Amount of Each Receipt this Period 10000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) The NRP Group LLC		Occupation (for Individual) Real Estate Broker	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Schusterman, Stacy, H, ,</b>			Date of Receipt MM / DD / YYYY 04 / 06 / 2022
Mailing Address 110 W 7Th St			<b>Transaction ID : VVC9XRZGCR8</b>
City Tulsa	State OK	Zip Code 74119-1031	Amount of Each Receipt this Period 500000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Schusterman Interests LLC		Occupation (for Individual) Chair	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. THIRD WAY</b>			Date of Receipt MM / DD / YYYY 04 / 13 / 2022
Mailing Address 1025 Connecticut Ave NW Ste 400			<b>Transaction ID : VVC9XRZJ1Z3</b>
City Washington	State DC	Zip Code 20036-5423	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C90021171			<input type="checkbox"/> Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	515000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

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

Mailing Address PO Box 910409

City San Diego State CA Zip Code 92191-0409

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

Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 03 / 2022

**Transaction ID : VVC9XRZJ219**

Amount of Each Receipt this Period  
5000.00

Memo Item

Non-Contribution Account

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	520000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2022
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAR76I</b> Amount of Each Disbursement this Period [ ] 21.19
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Fees		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 04 / 10 / 2022
Mailing Address PO Box 441146		FEC Identification Number C [ ] <b>Transaction ID : VVBANAR76I</b> Amount of Each Disbursement this Period [ ] 30.63
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Credit Card Fees		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Blue Wave Political Partners, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2022
Mailing Address 401 2Nd Ave S Ste 303		FEC Identification Number C [ ] <b>Transaction ID : VVBANAR76</b> Amount of Each Disbursement this Period [ ] 3000.00
City Seattle	State WA	Zip Code 98104-2862
Purpose of Disbursement Compliance Consulting		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3051.82
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 3051.82

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**DMFI PAC**

### A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 441146

M M M	/	D D D	/	Y Y Y Y Y
04		03		2022

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC Identification Number

Purpose of Disbursement  
Credit Card Fees

C

**Transaction ID : VVBANAR76!**  
Amount of Each Disbursement this Period

Candidate Name

395.00

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Non-Contribution Account  
 Memo Item

State: District:

### B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 441146

M M M	/	D D D	/	Y Y Y Y Y
04		10		2022

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC Identification Number

Purpose of Disbursement  
Credit Card Fees

C

**Transaction ID : VVBANAR76!**  
Amount of Each Disbursement this Period

Candidate Name

434.50

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Non-Contribution Account  
 Memo Item

State: District:

### C. NGP VAN

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1445 New York Ave NW  
Ste 200

M M M	/	D D D	/	Y Y Y Y Y
04		04		2022

City  
Washington

State  
DC

Zip Code  
20005-2158

FEC Identification Number

Purpose of Disbursement  
Software Rental

C

**Transaction ID : VVBANAR76!**  
Amount of Each Disbursement this Period

Candidate Name

54.60

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Non-Contribution Account  
 Memo Item

State: District:

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

884.10

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**DMFI PAC**

**A. Stanford Campaigns**

Full Name (Last, First, Middle Initial)

Mailing Address 3800 N Lamar Blvd  
Ste 200

City Austin State TX Zip Code 78756-0003

Purpose of Disbursement Research Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 04 / 2022

FEC Identification Number: C

Transaction ID : VVBANAR76!

Amount of Each Disbursement this Period: 5410.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5410.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6294.10

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 18
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**DMFI PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Democratic Majority For Israel</b>			Nature of Debt (Purpose): Staff Salaries, Rent, List Acquisition, and Fundraising Expenses
Mailing Address 1023 31St St NW Ste 530			
City Washington	State DC	Zip Code 20007-4458	

Outstanding Balance Beginning This Period 33379.97	Transaction ID : <b>VV9C59HD8H4</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 33379.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JL Research LLC</b>			Nature of Debt (Purpose): Research Consulting
Mailing Address 312 11Th Ave Apt 613			
City New York	State NY	Zip Code 10001-1221	

Outstanding Balance Beginning This Period 0.00	Transaction ID : <b>VV9C59HD9B0</b>	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Mellman Group</b>			Nature of Debt (Purpose): Polling
Mailing Address 1023 31St St NW FI 5			
City Washington	State DC	Zip Code 20007-4458	

Outstanding Balance Beginning This Period 0.00	Transaction ID : <b>VV9C59HD9V6</b>	
Amount Incurred This Period 7725.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7725.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	43604.97
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 18
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**DMFI PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Trilogy Interactive, LLC</b>			Nature of Debt (Purpose): Digital Advertising Buy
Mailing Address PO Box 4177			
City Mountain View	State CA	Zip Code 94040-0177	

Outstanding Balance Beginning This Period		Transaction ID : <b>VV9C59HD9T8</b>	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="90175.00"/>	<input type="text" value="0.00"/>	<input type="text" value="90175.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
<input type="text"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
<input type="text"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="90175.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="133779.97"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="133779.97"/>



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Cleveland Jewish News
Mailing Address 23880 Commerce Park Ste 1
City Beachwood State OH Zip Code 44122-5830
Purpose of Expenditure Newspaper Advertising
Date of Public Distribution/Dissemination 04/15/2022
Amount 1262.50
Transaction ID : VVBANAR7320
Date of Disbursement or Obligation 04/12/2022

Name of Federal Candidate: BROWN, M SHONTEL, , ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 35477.05
Disbursement For: Primary General 2022
Other (specify)

Full Name of Payee Cleveland Jewish News
Mailing Address 23880 Commerce Park Ste 1
City Beachwood State OH Zip Code 44122-5830
Purpose of Expenditure Newspaper Advertising
Date of Public Distribution/Dissemination 04/15/2022
Amount 1262.50
Transaction ID : VVBANAR7416
Date of Disbursement or Obligation 04/12/2022

Name of Federal Candidate: TURNER, NINA, , ,
Support Oppose
Office Sought: House District: 11
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 35477.05
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2525.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Petterson, Jay, , ,
Signature

[Electronically Filed]

Date 04/21/2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Dover Strategy Group, Inc.
Mailing Address 823 N 25Th St
City Philadelphia State PA Zip Code 19130-1818
Purpose of Expenditure Direct Mail Advertising
Name of Federal Candidate: BROWN, M SHONTEL, , ,
Calendar Year-To-Date Per Election for Office Sought 35477.05

Full Name of Payee Dover Strategy Group, Inc.
Mailing Address 823 N 25Th St
City Philadelphia State PA Zip Code 19130-1818
Purpose of Expenditure Direct Mail Advertising
Name of Federal Candidate: RYAN, TIMOTHY, , ,
Calendar Year-To-Date Per Election for Office Sought 29952.05

(a) SUBTOTAL of Itemized Independent Expenditures 59904.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 62429.10

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Petterson, Jay, , ,

[Electronically Filed]

Date 04 / 21 / 2022

Signature