

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

ADDRESS (number and street) 6151 MIRAMAR PKWY

SUITE 101

Check if different than previously reported. (ACC)

MIRAMAR

FL

33023

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00677492

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

FL

20

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)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

11 /

02 /

2021

in the State of

FL

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

/

/

/

in the State of

5. Covering Period

07 /

01 /

2021

through

10 /

13 /

2021

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

AINA, OLUBISI, , Dr.,

Type or Print Name of Treasurer

AINA, OLUBISI, , Dr.,

Signature of Treasurer

[Electronically Filed]

Date

10 /

21 /

2021

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	18248.33	117649.18
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	18248.33	117649.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1427620.57	1795284.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1427620.57	1795284.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	56521.87	
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).....	1744196.44	

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

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12893.92	95839.77
(ii) Unitemized	5354.41	21809.41
(iii) TOTAL of contributions from individuals	18248.33	117649.18
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18248.33	117649.18
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	1403757.94	3713764.94
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	1403757.94	3713764.94
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	1422006.27	3831414.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1427620.57	1795284.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	2019568.50	2019568.50
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	2019568.50	2019568.50
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3447189.07	3814853.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2081704.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1422006.27
25. SUBTOTAL (add Line 23 and Line 24).....	3503710.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3447189.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	56521.87

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

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

FOR LINE NUMBER: PAGE 5 OF 251
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

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

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **17561.19**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 04 / 2021

Transaction ID : SA11AI.6515

Amount of Each Receipt this Period

413.96

Memo Item

B. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

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

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **17741.50**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 11 / 2021

Transaction ID : SA11AI.6516

Amount of Each Receipt this Period

180.31

Memo Item

C. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

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

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **18489.44**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2021

Transaction ID : SA11AI.6517

Amount of Each Receipt this Period

747.94

Memo Item

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

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

1342.21

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6515

Total earmarked through conduit. Limit not affected.

Form/Schedule: SA11AI

Transaction ID: SA11AI.6516

Total earmarked through conduit. Limit not affected.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6517

Total earmarked through conduit. Limit not affected.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 8 OF 251
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **18618.29**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 25 2021

Transaction ID : SA11AI.6518

Amount of Each Receipt this Period
 128.85

Memo Item

B. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **18798.22**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 01 2021

Transaction ID : SA11AI.6519

Amount of Each Receipt this Period
 179.93

Memo Item

C. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **18850.84**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 08 2021

Transaction ID : SA11AI.6520

Amount of Each Receipt this Period
 52.62

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **361.40**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6518

Total earmarked through conduit. Limit not affected.

Form/Schedule: SA11AI

Transaction ID: SA11AI.6519

Total earmarked through conduit. Limit not affected.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6520

Total earmarked through conduit. Limit not affected.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 11 OF 251		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

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

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **18882.71**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2021

Transaction ID : SA11AI.6521

Amount of Each Receipt this Period
 31.87

Memo Item

B. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **19257.53**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2021

Transaction ID : SA11AI.6522

Amount of Each Receipt this Period
 374.82

Memo Item

C. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **19315.15**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2021

Transaction ID : SA11AI.6523

Amount of Each Receipt this Period
 57.62

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	464.31
TOTAL This Period (last page this line number only)..... ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6521

Total earmarked through conduit. Limit not affected.

Form/Schedule: SA11AI

Transaction ID: SA11AI.6522

Total earmarked through conduit. Limit not affected.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6523

Total earmarked through conduit. Limit not affected.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 14 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Actblue
 Mailing Address Po Box 441146
 City Somerville State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) **S**
 Election Cycle-to-Date **19588.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2021
Transaction ID : SA11AI.6524
 Amount of Each Receipt this Period
 273.03
 Memo Item

B. Full Name (Last, First, Middle Initial)
Actblue
 Mailing Address Po Box 441146
 City Somerville State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) **S**
 Election Cycle-to-Date **19678.75**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2021
Transaction ID : SA11AI.6525
 Amount of Each Receipt this Period
 90.57
 Memo Item

C. Full Name (Last, First, Middle Initial)
Actblue
 Mailing Address Po Box 441146
 City Somerville State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) **S**
 Election Cycle-to-Date **19721.03**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2021
Transaction ID : SA11AI.6526
 Amount of Each Receipt this Period
 42.28
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **405.88**
TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6524

Total earmarked through conduit. Limit not affected.

Form/Schedule: SA11AI

Transaction ID: SA11AI.6525

Total earmarked through conduit. Limit not affected.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6526

Total earmarked through conduit. Limit not affected.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 251
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **19728.44**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2021

Transaction ID : SA11AI.6527

Amount of Each Receipt this Period
 7.41

Memo Item

B. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **19944.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2021

Transaction ID : SA11AI.6528

Amount of Each Receipt this Period
 215.94

Memo Item

C. Full Name (Last, First, Middle Initial)
Actblue

Mailing Address Po Box 441146

City Somerville State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **20041.15**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2021

Transaction ID : SA11AI.6529

Amount of Each Receipt this Period
 96.77

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **320.12**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6527

Total earmarked through conduit. Limit not affected.

Form/Schedule: SA11AI

Transaction ID: SA11AI.6528

Total earmarked through conduit. Limit not affected.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6529

Total earmarked through conduit. Limit not affected.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 20 OF 251
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Aina, Temitope, , ,

Mailing Address 14761 Cedar Creek Place

City Davie	State FL	Zip Code 33325
---------------	-------------	-------------------

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

Name of Employer UPS	Occupation Driver
-------------------------	----------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2021

Transaction ID : SA11AI.6512

Amount of Each Receipt this Period

500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Alo, Adebay, , ,

Mailing Address 7717 Alhambra Blvd

City Mjramar	State FL	Zip Code 33023
-----------------	-------------	-------------------

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

Name of Employer Airports operations	Occupation Broward County Aviation
---	---------------------------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2021

Transaction ID : SA11AI.6503

Amount of Each Receipt this Period

500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Barclay, Aniya, , ,

Mailing Address 13146 SW 47th street

City Miramar	State FL	Zip Code 33027
-----------------	-------------	-------------------

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

Name of Employer UCF	Occupation Tutor
-------------------------	---------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2021

Transaction ID : SA11AI.6505

Amount of Each Receipt this Period

500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 21 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Cherenfant, Rochelle, , ,
 Mailing Address 665 Willis Street
 City South Hempstead State NY Zip Code 11550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US Bank Occupation UX Strategist
 Receipt For: 2022
 Primary General
 Other (specify) **S**
 Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2021
Transaction ID : SA11AI.6510
 Amount of Each Receipt this Period
500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Cherfilus, Marjorie, , ,
 Mailing Address 1200 Late Harvest Dr
 City Gambrills State MD Zip Code 21054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INOVA Occupation nurse supervisor
 Receipt For: 2022
 Primary General
 Other (specify) **S**
 Election Cycle-to-Date **5300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2021
Transaction ID : SA11AI.6507
 Amount of Each Receipt this Period
2500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Clunie, David, , ,
 Mailing Address 1485 5th Avenue, Apt 12 H
 City New York State NY Zip Code 10035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Executive Director Occupation Black Economic Alliance
 Receipt For: 2022
 Primary General
 Other (specify) **S**
 Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2021
Transaction ID : SA11AI.6500
 Amount of Each Receipt this Period
500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **3500.00**
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 22 OF 251
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Houston, Naomi, , ,

Mailing Address 3581 Chandler Estates Dr

City Apopka	State FL	Zip Code 32712
----------------	-------------	-------------------

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

Name of Employer OCPS	Occupation Secretary
--------------------------	-------------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2021

Transaction ID : SA11AI.6508

Amount of Each Receipt this Period

500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Jean-Baptiste, Jeffrey, , ,

Mailing Address 1200 Late Harvest dr

City Gambrills	State MD	Zip Code 21054
-------------------	-------------	-------------------

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

Name of Employer Coalfire federal	Occupation Cyber security consultant
--------------------------------------	---

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **1000.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2021

Transaction ID : SA11AI.6508

Amount of Each Receipt this Period

1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Lee, Yanique, , ,

Mailing Address 10120 NW 4th Court

City Pembroke Pines	State FL	Zip Code 33026
------------------------	-------------	-------------------

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

Name of Employer Miami Dade County Public Schools	Occupation Speech Language Pathologist
--	---

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2021

Transaction ID : SA11AI.6513

Amount of Each Receipt this Period

500.00

Memo Item

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 23 OF 251		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Morency, Michel, , ,

Mailing Address 1237 Canton Ave

City Milton	State MA	Zip Code 02186
----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2021

Transaction ID : SA11AI.6501

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Obas, Mimose, , ,

Mailing Address 85 Gallivan Blvd

City Dorchester	State MA	Zip Code 02124
--------------------	-------------	-------------------

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

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2021

Transaction ID : SA11AI.6502

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Oshoro, Adesheye, , ,

Mailing Address 642 Ivy Chase Loop

City DALLAS	State GA	Zip Code 30157
----------------	-------------	-------------------

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

Name of Employer PRA	Occupation Clinical Data Scientist
-------------------------	---------------------------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2021

Transaction ID : SA11AI.6504

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 251
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Prophete, Pascal, , ,

Mailing Address 3201 Dolphin Drive

City Miramar	State FL	Zip Code 33025
-----------------	-------------	-------------------

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

Name of Employer Keyes Company	Occupation Real Estate
-----------------------------------	---------------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2021

Transaction ID : SA11AI.6499

Amount of Each Receipt this Period

250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Shuman, Jay, , ,

Mailing Address 6215 43rd St

City Riverdale	State MD	Zip Code 20737
-------------------	-------------	-------------------

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

Name of Employer Arent Fox LLP	Occupation Attorney
-----------------------------------	------------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2021

Transaction ID : SA11AI.6497

Amount of Each Receipt this Period

250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Solomon, Brenda, , ,

Mailing Address 926 SW 102nd Terrace

City Pembroke Pines	State FL	Zip Code 33025
------------------------	-------------	-------------------

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

Name of Employer Affinity Insurance	Occupation Insurance Agent
--	-------------------------------

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2021

Transaction ID : SA11AI.6495

Amount of Each Receipt this Period

500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6499

Contribution earmarked through ActBlue.

Form/Schedule: SA11AI

Transaction ID: SA11AI.6497

Contribution earmarked through ActBlue.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6495

Contribution earmarked through ActBlue.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 27 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
Solomon, Brenda, , ,

Mailing Address 926 SW 102nd Terrace

City State Zip Code
Pembroke Pines FL 33025

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

Name of Employer Occupation
Affinity Insurance Insurance Agent

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 29 2021

Transaction ID : SA11AI.6514

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Williams, Taryn, , ,

Mailing Address 1959 N Orianna St

City State Zip Code
Philadelphia PA 19122

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

Name of Employer Occupation
Self Employed Self Employed

Receipt For: 2022
 Primary General
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 15 2021

Transaction ID : SA11AI.6511

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **S**

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	12893.92

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

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

FOR LINE NUMBER: PAGE 28 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2315007.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 08 2021

Transaction ID : SA13A.7308

Amount of Each Receipt this Period
 5000.00

Memo Item
Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2340007.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 12 2021

Transaction ID : SA13A.7309

Amount of Each Receipt this Period
 25000.00

Memo Item
Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2365007.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 14 2021

Transaction ID : SA13A.7310

Amount of Each Receipt this Period
 25000.00

Memo Item
Loan by candidate

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

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

55000.00

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

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

FOR LINE NUMBER: PAGE 29 OF 251
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/>

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR	State FL	Zip Code 33029
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES	Occupation CEO
--	-------------------

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2021

Transaction ID : SA13A.7311

Amount of Each Receipt this Period

150000.00

Memo Item
Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR	State FL	Zip Code 33029
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES	Occupation CEO
--	-------------------

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2021

Transaction ID : SA13A.7312

Amount of Each Receipt this Period

45000.00

Memo Item
Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR	State FL	Zip Code 33029
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES	Occupation CEO
--	-------------------

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2021

Transaction ID : SA13A.7313

Amount of Each Receipt this Period

60000.00

Memo Item
Loan by candidate

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

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

255000.00

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

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

FOR LINE NUMBER: PAGE 30 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2642375.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 05 2021

Transaction ID : SA13A.7314

Amount of Each Receipt this Period
 22368.38

Memo Item
Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2692375.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 09 2021

Transaction ID : SA13A.7315

Amount of Each Receipt this Period
 50000.00

Memo Item
Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2702375.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 17 2021

Transaction ID : SA13A.7316

Amount of Each Receipt this Period
 10000.00

Memo Item
Loan by candidate

SUBTOTAL of Receipts This Page (optional)..... ▶ **82368.38**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **2722375.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2021

Transaction ID : SA13A.7317

Amount of Each Receipt this Period
 20000.00

Memo Item
 Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **2762375.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2021

Transaction ID : SA13A.7318

Amount of Each Receipt this Period
 40000.00

Memo Item
 Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **2815075.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2021

Transaction ID : SA13A.7319

Amount of Each Receipt this Period
 52700.00

Memo Item
 Loan by candidate

SUBTOTAL of Receipts This Page (optional)..... ▶ **112700.00**

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

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

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

FOR LINE NUMBER: PAGE 32 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2835075.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 25 2021

Transaction ID : SA13A.7320

Amount of Each Receipt this Period
 20000.00

Memo Item
Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2858075.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 31 2021

Transaction ID : SA13A.7321

Amount of Each Receipt this Period
 23000.00

Memo Item
Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2908075.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 01 2021

Transaction ID : SA13A.7322

Amount of Each Receipt this Period
 50000.00

Memo Item
Loan by candidate

SUBTOTAL of Receipts This Page (optional)..... ▶ **93000.00**

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

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

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

FOR LINE NUMBER: PAGE 33 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **2983075.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2021

Transaction ID : SA13A.7323

Amount of Each Receipt this Period
 75000.00

Memo Item
Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **3003075.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2021

Transaction ID : SA13A.7324

Amount of Each Receipt this Period
 20000.00

Memo Item
Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **3103075.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2021

Transaction ID : SA13A.7325

Amount of Each Receipt this Period
 100000.00

Memo Item
Loan by candidate

SUBTOTAL of Receipts This Page (optional)..... ▶ **195000.00**

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

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

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

FOR LINE NUMBER: PAGE 34 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **3133075.38**

Date of Receipt
 M M / D D / Y Y Y Y
 09 21 2021

Transaction ID : SA13A.7326

Amount of Each Receipt this Period
 30000.00

Memo Item
Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **3163075.38**

Date of Receipt
 M M / D D / Y Y Y Y
 09 22 2021

Transaction ID : SA13A.7327

Amount of Each Receipt this Period
 30000.00

Memo Item
Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date **3289177.01**

Date of Receipt
 M M / D D / Y Y Y Y
 09 23 2021

Transaction ID : SA13A.7328

Amount of Each Receipt this Period
 126101.63

Memo Item
Loan by candidate

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

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

186101.63

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

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

FOR LINE NUMBER: PAGE 35 OF 251
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **3319177.01**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2021

Transaction ID : SA13A.7329

Amount of Each Receipt this Period
 30000.00

Memo Item
Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **3413764.94**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2021

Transaction ID : SA13A.7330

Amount of Each Receipt this Period
 94587.93

Memo Item
Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **3473764.94**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2021

Transaction ID : SA13A.7331

Amount of Each Receipt this Period
 60000.00

Memo Item
Loan by candidate

SUBTOTAL of Receipts This Page (optional)..... ▶ **184587.93**

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

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **3523764.94**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 04 / 2021

Transaction ID : SA13A.7332

Amount of Each Receipt this Period
50000.00

Memo Item
Loan by candidate

B. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **3541764.94**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2021

Transaction ID : SA13A.7333

Amount of Each Receipt this Period
18000.00

Memo Item
Loan by candidate

C. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **3561764.94**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2021

Transaction ID : SA13A.7334

Amount of Each Receipt this Period
20000.00

Memo Item
Loan by candidate

SUBTOTAL of Receipts This Page (optional)..... ▶ **88000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 OF 251
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
CHERFILUS-MCCORMICK, SHEILA, , ,

Mailing Address 18612 SW 41ST STREET

City MIRAMAR State FL Zip Code 33029

FEC ID number of contributing federal political committee. **C** H8FL20032

Name of Employer TRINITY HEALTH CARE SERVICES Occupation CEO

Receipt For: 2022
 Primary General
 Other (specify) **Special-Primary**

Election Cycle-to-Date **3713764.94**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2021

Transaction ID : SA13A.7335

Amount of Each Receipt this Period
 152000.00

Memo Item
 Loan by candidate

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-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 (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

152000.00

1403757.94

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. 4IMPRINT		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021
Mailing Address 101 Commerce Street		FEC Identification Number C
City Oshkosh	State WI	Zip Code 54901
Purpose of Disbursement Hand Sanitizer		Amount of Each Disbursement this Period 433.69
Candidate Name		Transaction ID : SB17.7147
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Accurate Business Systems Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021
Mailing Address 15725 NW 15th Ave		FEC Identification Number C
City Miami	State FL	Zip Code 33169
Purpose of Disbursement Printing/Signs		Amount of Each Disbursement this Period 17966.68
Candidate Name		Transaction ID : SB17.6969
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Accurate Business Systems Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021
Mailing Address 15725 NW 15th Ave		FEC Identification Number C
City Miami	State FL	Zip Code 33169
Purpose of Disbursement T-Shirts		Amount of Each Disbursement this Period 2247.00
Candidate Name		Transaction ID : SB17.6970
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	20647.37
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Accurate Business Systems Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2021	
Mailing Address 15725 NW 15th Ave			FEC Identification Number C	
City Miami	State FL	Zip Code 33169	Amount of Each Disbursement this Period 43430.00	
Purpose of Disbursement Direct Mail		Category/Type	Transaction ID : SB17.6971	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Adams, Charisma, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021	
Mailing Address 3018 Laurel Ridge Circle			FEC Identification Number C	
City Riviera Beach	State FL	Zip Code 33404	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Consulting		Category/Type	Transaction ID : SB17.6893	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Alkos Tender Love Care			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2021	
Mailing Address 611 NW 31st Ave			FEC Identification Number C	
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Donation		Category/Type	Transaction ID : SB17.7007	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	49430.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Anderson, Arielle, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2021
Mailing Address 13146 SW 47th St		FEC Identification Number C
City Miramar	State FL	Zip Code 33027
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 375.00
Candidate Name		Transaction ID : SB17.6920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Anderson, Arielle, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2021
Mailing Address 13146 SW 47th St		FEC Identification Number C
City Miramar	State FL	Zip Code 33027
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 45.00
Candidate Name		Transaction ID : SB17.6921
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Anderson, Arielle, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021
Mailing Address 13146 SW 47th St		FEC Identification Number C
City Miramar	State FL	Zip Code 33027
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 300.00
Candidate Name		Transaction ID : SB17.6922
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	720.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Anderson, Arielle, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021	
Mailing Address 13146 SW 47th St			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 225.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6923	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Anderson, Arielle, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021	
Mailing Address 13146 SW 47th St			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6924	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Anderson, Arielle, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021	
Mailing Address 13146 SW 47th St			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6925	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	825.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 251			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Anderson, Arielle, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021		
Mailing Address 13146 SW 47th St			FEC Identification Number C		
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 213.75		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6926		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Anderson, Arielle, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 13146 SW 47th St			FEC Identification Number C		
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6927		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Aparicio, Alexandra, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2021		
Mailing Address 6380 Plunkett Street			FEC Identification Number C		
City Hollywood	State FL	Zip Code 33023	Amount of Each Disbursement this Period 403.20		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6942		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	841.95
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Aparicio, Alexandra, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021		
Mailing Address 6380 Plunkett Street			FEC Identification Number C		
City Hollywood	State FL	Zip Code 33023			
Purpose of Disbursement Wages			Transaction ID : SB17.6943		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Aparicio, Alexandra, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021		
Mailing Address 6380 Plunkett Street			FEC Identification Number C		
City Hollywood	State FL	Zip Code 33023			
Purpose of Disbursement Wages			Transaction ID : SB17.6944		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Aparicio, Alexandra, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021		
Mailing Address 6380 Plunkett Street			FEC Identification Number C		
City Hollywood	State FL	Zip Code 33023			
Purpose of Disbursement Wages			Transaction ID : SB17.6945		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1651.20
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Aparicio, Alexandra, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 6380 Plunkett Street			FEC Identification Number C		
City Hollywood	State FL	Zip Code 33023	Amount of Each Disbursement this Period 1004.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6946		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Articulate Consulting			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021		
Mailing Address 3018 Laurel Ridge Circle			FEC Identification Number C		
City Riviera Beach	State FL	Zip Code 33404	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.7246		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Baki, Camellia, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2021		
Mailing Address 11650 SW 22nd Ct			FEC Identification Number C		
City Davie	State FL	Zip Code 33325	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6897		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6229.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Baki, Camellia, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2021	
Mailing Address 11650 SW 22nd Ct			FEC Identification Number C	
City Davie	State FL	Zip Code 33325	Amount of Each Disbursement this Period 225.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6898	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Barber, Jacquette, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021	
Mailing Address 1232 W 31st Street			FEC Identification Number C	
City Riviera Beach	State FL	Zip Code 33404	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Donation		Category/ Type	Transaction ID : SB17.6775	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Barber, Jacquette, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021	
Mailing Address 1232 W 31st Street			FEC Identification Number C	
City Riviera Beach	State FL	Zip Code 33404	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Donation		Category/ Type	Transaction ID : SB17.6776	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Barber, Jacquette, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021	
Mailing Address 4577 N. Nob Hill Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 314.50	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6778	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Barber, Jacquette, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 727 W Tiffany Drive			FEC Identification Number C	
City Mangonia Park	State FL	Zip Code 33407	Amount of Each Disbursement this Period 1950.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6773	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Bazile, Jean, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2021	
Mailing Address 425 NW 15th Terrace			FEC Identification Number C	
City Fort Lauderdale	State FL	Zip Code 33311	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6754	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3064.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement
Mailing Address 3401 N Pine Island Rd		M M / D D / Y Y Y Y 07 / 08 / 2021
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 72.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7096
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement
Mailing Address 3401 N Pine Island Rd		M M / D D / Y Y Y Y 07 / 13 / 2021
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 36.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7104
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement
Mailing Address 3401 N Pine Island Rd		M M / D D / Y Y Y Y 07 / 21 / 2021
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 276.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7116
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	384.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021
Mailing Address 3401 N Pine Island Rd		FEC Identification Number C
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 16.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7139 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2021
Mailing Address 3401 N Pine Island Rd		FEC Identification Number C
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7150 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021
Mailing Address 3401 N Pine Island Rd		FEC Identification Number C
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7160 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	56.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7164	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. BB&T			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 108.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7168	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. BB&T			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 108.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7168	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	236.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7173	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. BB&T			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 532.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7175	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. BB&T			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 8.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7178	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	560.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement
Mailing Address 3401 N Pine Island Rd		M M / D D / Y Y Y Y 08 / 24 / 2021
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 24.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7179
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement
Mailing Address 3401 N Pine Island Rd		M M / D D / Y Y Y Y 08 / 30 / 2021
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 40.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7182
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement
Mailing Address 3401 N Pine Island Rd		M M / D D / Y Y Y Y 08 / 31 / 2021
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 8.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7185
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	72.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 8.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7188	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 16.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7189	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 24.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7202	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	48.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021
Mailing Address 3401 N Pine Island Rd		FEC Identification Number C
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 8.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7204
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021
Mailing Address 3401 N Pine Island Rd		FEC Identification Number C
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7205
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2021
Mailing Address 3401 N Pine Island Rd		FEC Identification Number C
City Sunrise	State FL	Zip Code 33351
Purpose of Disbursement Bank Fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 36.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7209
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	64.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 164.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7211	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 36.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7212	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 28.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7213	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	228.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 36.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7214	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 288.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7215	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 36.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7218	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	360.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 72.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7219	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 181.48	
Purpose of Disbursement Checks		Category/ Type	Transaction ID : SB17.7220	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021	
Mailing Address 3401 N Pine Island Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 72.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.7224	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	325.48
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Black, Eric, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021		
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 390.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6810		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Black, Eric, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021		
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 420.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6811		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Black, Eric, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021		
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 520.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6812		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1330.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Black, Eric, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021		
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 720.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6813		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Black, Eric, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021		
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 680.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6814		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Black, Eric, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021		
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 1100.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6815		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Black, Eric, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 840.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6816		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. BOTB Entertainment			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021		
Mailing Address 601 NE 36th St			FEC Identification Number C		
City Miami	State FL	Zip Code 33137	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Consulting		Category/ Type	Transaction ID : SB17.7243		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Briceno, Sabrina, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2021		
Mailing Address 1068 SW 158th Way			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 293.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6614		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6133.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Bright Child Academy		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2021
Mailing Address 406 Federal Hwy		FEC Identification Number C
City Lake Park	State FL	Zip Code 33403
Purpose of Disbursement Donation	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7058
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Broadcast Beat		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021
Mailing Address 555 S Dixie Hwy E		FEC Identification Number C
City Pompano Beach	State FL	Zip Code 33060
Purpose of Disbursement Studio Rental	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7141
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Bryant, Checree, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021
Mailing Address 890 Brandon Prescott Lane #205		FEC Identification Number C
City West Palm Beach	State FL	Zip Code 33401
Purpose of Disbursement Wages	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 891.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6889
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2991.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Bryant, Checree, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021
Mailing Address 890 Brandon Prescott Lane #205		FEC Identification Number C
City West Palm Beach	State FL	Zip Code 33401
Purpose of Disbursement Wages	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 923.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6890 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Bryant, Checree, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021
Mailing Address 890 Brandon Prescott Lane #205		FEC Identification Number C
City West Palm Beach	State FL	Zip Code 33401
Purpose of Disbursement Wages	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1130.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6891 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Butler, Sherri, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021
Mailing Address 789 Dixie Beach Circle		FEC Identification Number C
City Tamarac	State FL	Zip Code 33321
Purpose of Disbursement Wages	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 435.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6587 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2488.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Butler, Sherri, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2021		
Mailing Address 789 Dixie Beach Circle			FEC Identification Number C		
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 450.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6588		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Butler, Sherri, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2021		
Mailing Address 789 Dixie Beach Circle			FEC Identification Number C		
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 435.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6589		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Butler, Sherri, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021		
Mailing Address 789 Dixie Beach Circle			FEC Identification Number C		
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 85.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6590		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	970.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Butler, Sherri, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021		
Mailing Address 789 Dixie Beach Circle			FEC Identification Number C		
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 180.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6591		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Butler, Sherri, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021		
Mailing Address 789 Dixie Beach Circle			FEC Identification Number C		
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 210.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6592		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Butler, Sherri, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021		
Mailing Address 789 Dixie Beach Circle			FEC Identification Number C		
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6593		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	▶	690.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Butler, Sherri, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021	
Mailing Address 789 Dixie Beach Circle			FEC Identification Number C	
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 314.50	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6594	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Cadet, Kandrina, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2021	
Mailing Address 1185 NE 134th St			FEC Identification Number C	
City North Miami	State FL	Zip Code 33161	Amount of Each Disbursement this Period 60.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6705	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. CALLHUB			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021	
Mailing Address 340 S Lemon Ave			FEC Identification Number C	
City Walnut	State CA	Zip Code 91789	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Call Center		Category/ Type	Transaction ID : SB17.7143	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5374.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. CALLHUB			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021		
Mailing Address 340 S Lemon Ave			FEC Identification Number C		
City Walnut	State CA	Zip Code 91789	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Call Center		Category/ Type	Transaction ID : SB17.7148		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. CALLHUB			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021		
Mailing Address 340 S Lemon Ave			FEC Identification Number C		
City Walnut	State CA	Zip Code 91789	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Call Center		Category/ Type	Transaction ID : SB17.7190		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. CALLHUB			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021		
Mailing Address 340 S Lemon Ave			FEC Identification Number C		
City Walnut	State CA	Zip Code 91789	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Call Center		Category/ Type	Transaction ID : SB17.7232		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	▶	15000.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. CALLHUB			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 340 S Lemon Ave			FEC Identification Number C		
City Walnut	State CA	Zip Code 91789	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Call Center		Category/ Type	Transaction ID : SB17.7247		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Cardosa, Cristina, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021		
Mailing Address 10400 NW 30th Court #402			FEC Identification Number C		
City Sunrise	State FL	Zip Code 33322	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6859		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Cardosa, Cristina, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2021		
Mailing Address 10400 NW 30th Court #402			FEC Identification Number C		
City Sunrise	State FL	Zip Code 33322	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6860		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Cardoso, Cristina, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2021		
Mailing Address 10400 NW 30th Court #402			FEC Identification Number C		
City Sunrise	State FL	Zip Code 33322	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6861		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Cardoso, Cristina, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2021		
Mailing Address 10400 NW 30th Court #402			FEC Identification Number C		
City Sunrise	State FL	Zip Code 33322	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6862		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Cardoso, Cristina, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021		
Mailing Address 10400 NW 30th Court #402			FEC Identification Number C		
City Sunrise	State FL	Zip Code 33322	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6863		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Cardoso, Cristina, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2021
Mailing Address 10400 NW 30th Court #402		FEC Identification Number C
City Sunrise	State FL	Zip Code 33322
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 255.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6864 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Cardoso, Cristina, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021
Mailing Address 10400 NW 30th Court #402		FEC Identification Number C
City Sunrise	State FL	Zip Code 33322
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 255.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6865 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Cardoso, Cristina, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021
Mailing Address 10400 NW 30th Court #402		FEC Identification Number C
City Sunrise	State FL	Zip Code 33322
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 255.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6866 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	765.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Caribbean National Weekly			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021		
Mailing Address PO Box 551712			FEC Identification Number C		
City Davie	State FL	Zip Code 33355	Amount of Each Disbursement this Period 1700.00		
Purpose of Disbursement Print Ad		Category/ Type	Transaction ID : SB17.6967		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Carlson, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021		
Mailing Address 727 W Tiffany Drive			FEC Identification Number C		
City Mangonia Park	State FL	Zip Code 33407	Amount of Each Disbursement this Period 2991.00		
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6768		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Catrese Special Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2021		
Mailing Address PO Box 681545 #110			FEC Identification Number C		
City Miami	State FL	Zip Code 33168	Amount of Each Disbursement this Period 145.00		
Purpose of Disbursement Cleaning Service		Category/ Type	Transaction ID : SB17.6978		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	▶	4836.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Catrese Special Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2021		
Mailing Address PO Box 681545 #110			FEC Identification Number C		
City Miami	State FL	Zip Code 33168	Amount of Each Disbursement this Period 145.00		
Purpose of Disbursement Cleaning Service		Category/ Type	Transaction ID : SB17.6979		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Catrese Special Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2021		
Mailing Address PO Box 681545 #110			FEC Identification Number C		
City Miami	State FL	Zip Code 33168	Amount of Each Disbursement this Period 145.00		
Purpose of Disbursement Cleaning Service		Category/ Type	Transaction ID : SB17.6980		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Catrese Special Services			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021		
Mailing Address PO Box 681545 #110			FEC Identification Number C		
City Miami	State FL	Zip Code 33168	Amount of Each Disbursement this Period 145.00		
Purpose of Disbursement Cleaning Service		Category/ Type	Transaction ID : SB17.6981		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	435.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Catrese Special Services		Date of Disbursement
Mailing Address PO Box 681545 #110		M M / D D / Y Y Y Y 09 / 27 / 2021
City Miami	State FL	Zip Code 33168
Purpose of Disbursement Cleaning Service		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 145.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6982
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Catrese Special Services		Date of Disbursement
Mailing Address PO Box 681545 #110		M M / D D / Y Y Y Y 10 / 07 / 2021
City Miami	State FL	Zip Code 33168
Purpose of Disbursement Cleaning Service		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 145.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6983
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. Chaves, Juan, , ,		Date of Disbursement
Mailing Address 88320 NW 191st Lane		M M / D D / Y Y Y Y 08 / 03 / 2021
City Hialeah	State FL	Zip Code 33015
Purpose of Disbursement Wages		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 435.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6719
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	725.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2021	
Mailing Address 88320 NW 191st Lane			FEC Identification Number C	
City Hialeah	State FL	Zip Code 33015	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6720	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021	
Mailing Address 88320 NW 191st Lane			FEC Identification Number C	
City Hialeah	State FL	Zip Code 33015	Amount of Each Disbursement this Period 210.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6721	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2021	
Mailing Address 88320 NW 191st Lane			FEC Identification Number C	
City Hialeah	State FL	Zip Code 33015	Amount of Each Disbursement this Period 375.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6722	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	885.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021		
Mailing Address 88320 NW 191st Lane			FEC Identification Number C		
City Hialeah	State FL	Zip Code 33015	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6723		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021		
Mailing Address 88320 NW 191st Lane			FEC Identification Number C		
City Hialeah	State FL	Zip Code 33015	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6724		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021		
Mailing Address 88320 NW 191st Lane			FEC Identification Number C		
City Hialeah	State FL	Zip Code 33015	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6725		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021		
Mailing Address 88320 NW 191st Lane			FEC Identification Number C		
City Hialeah	State FL	Zip Code 33015	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6726		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021		
Mailing Address 825 29th Street			FEC Identification Number C		
City West Palm Beach	State FL	Zip Code 33407	Amount of Each Disbursement this Period 441.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6732		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Chaves, Juan, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 825 29th Street			FEC Identification Number C		
City West Palm Beach	State FL	Zip Code 33407	Amount of Each Disbursement this Period 1004.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6733		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	▶	1745.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Chaves, Juan, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021
Mailing Address 88320 NW 191st Lane		FEC Identification Number C
City Hialeah	State FL	
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 457.50
Candidate Name		Transaction ID : SB17.6727
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Chaves, Juan, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021
Mailing Address 88320 NW 191st Lane		FEC Identification Number C
City Hialeah	State FL	
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 300.00
Candidate Name		Transaction ID : SB17.6728
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Cinelli, Scott, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021
Mailing Address 3943 NW 94th Way		FEC Identification Number C
City Sunrise	State FL	
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 306.54
Candidate Name		Transaction ID : SB17.6600
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	▶	1064.04
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Cinelli, Scott, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021	
Mailing Address 3943 NW 94th Way			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 640.44	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6601	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Clark, Zeffery, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 751 Pine Drive #202			FEC Identification Number C	
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6532	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Claude, Cheyenne, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2021	
Mailing Address 6027 SW 36th Ct #B			FEC Identification Number C	
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 217.50	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6883	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	1357.94
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Claude, Cheyenne, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021		
Mailing Address 6027 SW 36th Ct #B			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 337.50		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6884		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Claude, Cheyenne, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021		
Mailing Address 6027 SW 36th Ct #B			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 481.61		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6885		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Claude, Cheyenne, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021		
Mailing Address 6027 SW 36th Ct #B			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 574.56		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6886		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	▶	1393.67
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Claude, Cheyenne, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021		
Mailing Address 6027 SW 36th Ct #B			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 594.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6887		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Clear Channel			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021		
Mailing Address 5800 NW 77th Ct			FEC Identification Number C		
City Doral	State FL	Zip Code 33166	Amount of Each Disbursement this Period 6000.00		
Purpose of Disbursement Billboard Buy		Category/ Type	Transaction ID : SB17.7145		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Clear Channel			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021		
Mailing Address 5800 NW 77th Ct			FEC Identification Number C		
City Doral	State FL	Zip Code 33166	Amount of Each Disbursement this Period 15219.00		
Purpose of Disbursement Billboard Buy		Category/ Type	Transaction ID : SB17.7206		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	21813.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6559		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 360.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6560		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6561		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	960.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6562		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6563		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6564		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 75.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6565		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6566		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Cornish, Tiniyah, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021		
Mailing Address 1816 Runners Way			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6567		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Courtyard Office Plaza LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021	
Mailing Address 4577 N. Nob Hill Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 4080.84	
Purpose of Disbursement Office Rent		Category/ Type	Transaction ID : SB17.6985	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Courtyard Office Plaza LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2021	
Mailing Address 4577 N. Nob Hill Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 4780.83	
Purpose of Disbursement Office Rent		Category/ Type	Transaction ID : SB17.6986	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Courtyard Office Plaza LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 4577 N. Nob Hill Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 4780.83	
Purpose of Disbursement Office Rent		Category/ Type	Transaction ID : SB17.6987	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	13642.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Dees, Burl, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2021	
Mailing Address 5816 NW 23rd Street			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6900	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. de la Cotera, Rosa, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 9357 SW 77th Ave			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 612.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6616	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. de la Cotera, Rosa, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021	
Mailing Address 9357 SW 77th Ave			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 180.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6617	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1092.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. de la Cotera, Rosa, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021		
Mailing Address 9357 SW 77th Ave			FEC Identification Number C		
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 108.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6618		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. De Valle, Elaine, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021		
Mailing Address 10400 SW 82nd Ave			FEC Identification Number C		
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6832		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. De Valle, Elaine, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021		
Mailing Address 10400 SW 82nd Ave			FEC Identification Number C		
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Consulting Fee		Category/ Type	Transaction ID : SB17.6833		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1108.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. De Valle, Elaine, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021	
Mailing Address 10400 SW 82nd Ave			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Consulting Fee		Category/ Type	Transaction ID : SB17.6834	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Diamond Jr, Kevin, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2021	
Mailing Address 216 Blazer Ct			FEC Identification Number C	
City Melbourne Beach	State FL	Zip Code 32951	Amount of Each Disbursement this Period 4700.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6684	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Diaz, Rocco, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2021	
Mailing Address 1201 Ponce de Leon			FEC Identification Number C	
City Coral Gables	State FL	Zip Code 33134	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6623	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5650.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Diaz, Rocco, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2021		
Mailing Address 1201 Ponce de Leon			FEC Identification Number C		
City Coral Gables	State FL	Zip Code 33134	Amount of Each Disbursement this Period 533.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6624		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Diaz, Rocco, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 1201 Ponce de Leon			FEC Identification Number C		
City Coral Gables	State FL	Zip Code 33134	Amount of Each Disbursement this Period 270.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6625		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Diaz, Rocco, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 1201 Ponce de Leon			FEC Identification Number C		
City Coral Gables	State FL	Zip Code 33134	Amount of Each Disbursement this Period 360.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6626		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1163.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Diaz, Rocco, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2021		
Mailing Address 1201 Ponce de Leon			FEC Identification Number C		
City Coral Gables	State FL	Zip Code 33134	Amount of Each Disbursement this Period 315.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6627		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Diaz, Rocco, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2021		
Mailing Address 1201 Ponce de Leon			FEC Identification Number C		
City Coral Gables	State FL	Zip Code 33134	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6628		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Doganieri, Kameron, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021		
Mailing Address 7050 SW 59th St			FEC Identification Number C		
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 362.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6707		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	977.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Doganieri, Kameron, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2021	
Mailing Address 7050 SW 59th St		FEC Identification Number C	
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 161.00
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6708
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

Full Name (Last, First, Middle Initial) B. Doganieri, Kameron, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021	
Mailing Address 7050 SW 59th St		FEC Identification Number C	
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 178.50
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6709
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

Full Name (Last, First, Middle Initial) C. Doganieri, Kameron, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2021	
Mailing Address 7050 SW 59th St		FEC Identification Number C	
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 246.50
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6710
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	586.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Doganieri, Kameron, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021	
Mailing Address 7050 SW 59th St		FEC Identification Number C	
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 110.50
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6711
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

Full Name (Last, First, Middle Initial) B. Doganieri, Kameron, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 7050 SW 59th St		FEC Identification Number C	
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 304.00
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6712
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

Full Name (Last, First, Middle Initial) C. Doganieri, Kameron, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021	
Mailing Address 7050 SW 59th St		FEC Identification Number C	
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 102.00
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6713
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	516.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Doganieri, Kameron, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 7050 SW 59th St			FEC Identification Number C	
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 170.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6714	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Doganieri, Kameron, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 7050 SW 59th St			FEC Identification Number C	
City Southwest Ranches	State FL	Zip Code 33331	Amount of Each Disbursement this Period 221.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6715	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Dona, Daniella, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 9357 SW 77th Ave #510			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6857	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	841.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Dona, Danielle, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021		
Mailing Address 9357 SW 77th Ave #510			FEC Identification Number C		
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 558.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6854		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Dona, Danielle, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021		
Mailing Address 9357 SW 77th Ave #510			FEC Identification Number C		
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 450.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6855		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2021		
Mailing Address 901 Market Street #6			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 34.23		
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7109		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1042.23
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2021		
Mailing Address 901 Market Street #6			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 47.52		
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7110		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2021		
Mailing Address 901 Market Street #6			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 149.82		
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7111		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021		
Mailing Address 901 Market Street #6			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 42.08		
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7130		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	239.42
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021	
Mailing Address 901 Market Street #6			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 9.99	
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7131	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2021	
Mailing Address 901 Market Street #6			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 9.99	
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7186	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021	
Mailing Address 901 Market Street #6			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 107.28	
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7191	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	127.26
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2021	
Mailing Address 901 Market Street #6			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 137.41	
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7198	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2021	
Mailing Address 901 Market Street #6			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 195.73	
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7207	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. DOORDASH			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 901 Market Street #6			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 9.99	
Purpose of Disbursement Food for Staff		Category/ Type	Transaction ID : SB17.7236	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	343.13
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. DOORDASH		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021
Mailing Address 901 Market Street #6		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Food for Staff	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 38.49	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7244
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Dray, Emily, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021
Mailing Address 310 NW 197th Ave		FEC Identification Number C
City Pembroke Pines	State FL	Zip Code 33029
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 620.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6825
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Dray, Emily, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021
Mailing Address 310 NW 197th Ave		FEC Identification Number C
City Pembroke Pines	State FL	Zip Code 33029
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 543.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6826
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1201.49
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Dray, Emily, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 310 NW 197th Ave			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 899.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6827		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Dray, Emily, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021		
Mailing Address 310 NW 197th Ave			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 976.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6828		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Dray, Emily, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2021		
Mailing Address 310 NW 197th Ave			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6829		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2375.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Dray, Emily, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2021		
Mailing Address 310 NW 197th Ave			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 899.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6830		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. EffectTV			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2021		
Mailing Address 5915 Ponce De Leon Blvd #64			FEC Identification Number C		
City Coral Gables	State FL	Zip Code 33146	Amount of Each Disbursement this Period 40000.00		
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7118		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. EffectTV			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2021		
Mailing Address 5915 Ponce De Leon Blvd #64			FEC Identification Number C		
City Coral Gables	State FL	Zip Code 33146	Amount of Each Disbursement this Period 40000.00		
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7123		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	80899.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. EffectTV		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2021
Mailing Address 5915 Ponce De Leon Blvd #64		FEC Identification Number C C00677492
City Coral Gables	State FL	Zip Code 33146
Purpose of Disbursement TV Buy	Category/ Type 004	
Candidate Name SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC		Amount of Each Disbursement this Period 20100.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary	Transaction ID : SB17.7299 <input type="checkbox"/> Memo Item
State: FL District: 20		

Full Name (Last, First, Middle Initial) B. EffectTV		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021
Mailing Address 5915 Ponce De Leon Blvd #64		FEC Identification Number C C00677492
City Coral Gables	State FL	Zip Code 33146
Purpose of Disbursement TV Buy	Category/ Type 004	
Candidate Name SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC		Amount of Each Disbursement this Period 30000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary	Transaction ID : SB17.7300 <input type="checkbox"/> Memo Item
State: FL District: 20		

Full Name (Last, First, Middle Initial) C. El Toro		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2021
Mailing Address 552 E Market Street		FEC Identification Number C
City Louisville	State KY	Zip Code 40202
Purpose of Disbursement Digital Buy	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period 20000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary	Transaction ID : SB17.7170 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	70100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Ezenwa, Ikenna, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021
Mailing Address 983 SW 176th Terrace		FEC Identification Number C
City Pembroke Pines	State FL	Zip Code 33029
Purpose of Disbursement Wages	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 225.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6785
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Ezenwa, Ikenna, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021
Mailing Address 701 Northpoint Pkwy #500		FEC Identification Number C
City West Palm Beach FL	State FL	Zip Code 33407
Purpose of Disbursement Radio	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6787
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2021
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Ad	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 600.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7126
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....	▶	4825.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Ad	Candidate Name	Amount of Each Disbursement this Period 900.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7132
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Facebook		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2021
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Ad	Candidate Name	Amount of Each Disbursement this Period 900.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7151
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Facebook		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Ad	Candidate Name	Amount of Each Disbursement this Period 900.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7153
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00		
Purpose of Disbursement Digital Ad		Category/ Type	Transaction ID : SB17.7154		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00		
Purpose of Disbursement Digital Ad		Category/ Type	Transaction ID : SB17.7161		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00		
Purpose of Disbursement Digital Ad		Category/ Type	Transaction ID : SB17.7176		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00		
Purpose of Disbursement Digital Ad		Category/ Type	Transaction ID : SB17.7177		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 75.00		
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7292		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 50.00		
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7293		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 35.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7294	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7295	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7296	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7297		
Candidate Name			<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 125.00		
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7290		
Candidate Name			<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2021		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 75.00		
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7291		
Candidate Name			<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Amount of Each Disbursement this Period 175.00
Candidate Name		Transaction ID : SB17.7289
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2021
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Amount of Each Disbursement this Period 250.00
Candidate Name		Transaction ID : SB17.7288
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Facebook		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2021
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Amount of Each Disbursement this Period 400.00
Candidate Name		Transaction ID : SB17.7287
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7286	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7285	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7284	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7283	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7282	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 923.24	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7281	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7280	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7279	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7278	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7277	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7276	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7275	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7274	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	State: District:		

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7273	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	State: District:		

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7272	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7271	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7270	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7269	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 226.02	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7268	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7266	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7267	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7265	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7264	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7263	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7262	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7261	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7260	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7259	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7257	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Facebook			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 900.00	
Purpose of Disbursement Candidate In-Kind Memo Entry- Digital Ads		Category/ Type	Transaction ID : SB17.7258	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Feagin, Mae, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 3500 SW Natura Blvd #203			FEC Identification Number C	
City Deerfield	State FL	Zip Code 33441	Amount of Each Disbursement this Period 801.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6668	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Feldman, Samantha, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021	
Mailing Address 17809 NW 16th St			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 442.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6606	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Feldman, Samantha, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021	
Mailing Address 17809 NW 16th St			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 340.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6607	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1583.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Feldman, Samantha, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2021	
Mailing Address 17809 NW 16th St			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 246.50	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6608	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Feldman, Samantha, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021	
Mailing Address 17809 NW 16th St			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 110.50	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6609	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Feldman, Samantha, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021	
Mailing Address 17809 NW 16th St			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 453.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6610	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	810.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Feldman, Samantha, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021		
Mailing Address 17809 NW 16th St			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 170.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6611		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Feldman, Samantha, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 17809 NW 16th St			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 119.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6612		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Florida Department of State			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021		
Mailing Address 500 South Bronough Street			FEC Identification Number C		
City Tallahassee	State FL	Zip Code 32399	Amount of Each Disbursement this Period 10440.00		
Purpose of Disbursement Qualifying		Category/ Type	Transaction ID : SB17.6994		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	10729.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Fobbs Family Daycare			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021	
Mailing Address 1358 W 29th St			FEC Identification Number C	
City Riviera Beach	State FL	Zip Code 33404	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Donation		Category/ Type	Transaction ID : SB17.7043	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Future Adventures			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021	
Mailing Address 13020 SW 30th Ct			FEC Identification Number C	
City Davie	State FL	Zip Code 33330	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.7193	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Galeforce Digital			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021	
Mailing Address 8895 N Military Trl #202C			FEC Identification Number C	
City Palm Beach Gardens	State FL	Zip Code 33410	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Digital Buy		Category/ Type	Transaction ID : SB17.7134	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Galeforce Digital		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021
Mailing Address 8895 N Military Trail		FEC Identification Number C
City Palm Beach Gardens	State FL	Zip Code 33410
Purpose of Disbursement Digital Buy	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 10000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7156
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Galloway, Clinton, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021
Mailing Address 2831 Avenue S		FEC Identification Number C
City Riviera Beach	State FL	Zip Code 33404
Purpose of Disbursement Wages	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 432.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6878
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Galloway, Clinton, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021
Mailing Address 2831 Avenue S		FEC Identification Number C C00677492
City Riviera Beach	State FL	Zip Code 33404
Purpose of Disbursement Wages	Category/Type 001	
Candidate Name SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC	Amount of Each Disbursement this Period 515.88	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Transaction ID : SB17.7298
State: FL District: 20	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10947.88
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Galloway, Clinton, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 2831 Avenue S			FEC Identification Number C		
City Riviera Beach	State FL	Zip Code 33404	Amount of Each Disbursement this Period 666.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6879		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021		
Mailing Address 2911 NW 56th Ave #C1			FEC Identification Number C		
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 447.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6908		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 2911 NW 56th Ave #C1			FEC Identification Number C		
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6909		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	▶	1338.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021	
Mailing Address 2911 NW 56th Ave #C1			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 285.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6910	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2021	
Mailing Address 2911 NW 56th Ave #C1			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 195.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6911	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021	
Mailing Address 2911 NW 56th Ave #C1			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 225.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6912	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	705.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021	
Mailing Address 2911 NW 56th Ave #C1			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 210.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6913	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021	
Mailing Address 2911 NW 56th Ave #C1			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6914	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 2911 NW 56th Ave #C1			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33313	Amount of Each Disbursement this Period 225.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6915	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	735.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021		
Mailing Address 2911 NW 56th Ave #C1					
City Lauderhill	State FL	Zip Code 33313	FEC Identification Number C		
Purpose of Disbursement Wages			Amount of Each Disbursement this Period 300.00		
Candidate Name			Transaction ID : SB17.6916		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021		
Mailing Address 2911 NW 56th Ave #C1					
City Lauderhill	State FL	Zip Code 33313	FEC Identification Number C		
Purpose of Disbursement Wages			Amount of Each Disbursement this Period 300.00		
Candidate Name			Transaction ID : SB17.6917		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) c. Gaspard, Bianca, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 2911 NW 56th Ave #C1					
City Lauderhill	State FL	Zip Code 33313	FEC Identification Number C		
Purpose of Disbursement Wages			Amount of Each Disbursement this Period 375.00		
Candidate Name			Transaction ID : SB17.6918		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	975.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. George, Emmanuel, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2021		
Mailing Address 13 NE 2nd Ave #101			FEC Identification Number C		
City Dania Beach	State FL	Zip Code 33004	Amount of Each Disbursement this Period 750.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6818		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. George, Emmanuel, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021		
Mailing Address 13 NE 2nd Ave #101			FEC Identification Number C		
City Dania Beach	State FL	Zip Code 33004	Amount of Each Disbursement this Period 665.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6819		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. George, Emmanuel, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021		
Mailing Address 13 NE 2nd Ave #101			FEC Identification Number C		
City Dania Beach	State FL	Zip Code 33004	Amount of Each Disbursement this Period 488.40		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6820		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1903.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. George, Emmanuel, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021		
Mailing Address 13 NE 2nd Ave #101			FEC Identification Number C		
City Dania Beach	State FL	Zip Code 33004	Amount of Each Disbursement this Period 385.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6821		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. George, Emmanuel, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021		
Mailing Address 13 NE 2nd Ave #101			FEC Identification Number C		
City Dania Beach	State FL	Zip Code 33004	Amount of Each Disbursement this Period 480.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6822		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. George, Emmanuel, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 13 NE 2nd Ave #101			FEC Identification Number C		
City Dania Beach	State FL	Zip Code 33004	Amount of Each Disbursement this Period 1020.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6823		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1885.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Gilmore, Angelia, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2021
Mailing Address 11340 SW 17th Ct		FEC Identification Number C
City Miramar	State FL	Zip Code 33025
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 324.36	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6931
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Gose, Constance, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021
Mailing Address 575 NE 5th Terrace #435		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33301
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 300.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6868
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Gose, Constance, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021
Mailing Address 575 NE 5th Terrace #435		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33301
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 210.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6869
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	834.36
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Gose, Constance, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2021		
Mailing Address 575 NE 5th Terrace #435			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33301	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6870		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Gose, Constance, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2021		
Mailing Address 575 NE 5th Terrace #435			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33301	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6871		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Gose, Constance, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021		
Mailing Address 575 NE 5th Terrace #435			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33301	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6872		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	825.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Gose, Constance, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021	
Mailing Address 575 NE 5th Terrace #435			FEC Identification Number C	
City Fort Lauderdale	State FL	Zip Code 33301	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6873	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Gose, Constance, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021	
Mailing Address 575 NE 5th Terrace #435			FEC Identification Number C	
City Fort Lauderdale	State FL	Zip Code 33301	Amount of Each Disbursement this Period 170.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6874	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Gose, Constance, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 575 NE 5th Terrace #435			FEC Identification Number C	
City Fort Lauderdale	State FL	Zip Code 33301	Amount of Each Disbursement this Period 68.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6875	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	388.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Gose, Constance, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021
Mailing Address 575 NE 5th Terrace #435		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33301
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 170.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6876
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. G PRINT INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2021
Mailing Address 17062 NW 60th Ct		FEC Identification Number C
City Hialeah	State FL	Zip Code 33015
Purpose of Disbursement Car Wrapping	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2129.38	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7015
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Grant, Zanolee, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2021
Mailing Address 407 W Woodscape Drive		FEC Identification Number C
City Miramar	State FL	Zip Code 33023
Purpose of Disbursement Political Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6534
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	4799.38
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Grant, Zanoolee, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021		
Mailing Address 407 W Woodscape Drive			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6535		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Grant, Zanoolee, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021		
Mailing Address 407 W Woodscape Drive			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6536		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Grant, Zanoolee, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021		
Mailing Address 407 W Woodscape Drive			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6537		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	7700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Grant, Zanoole, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021
Mailing Address 407 W Woodscape Drive		FEC Identification Number C
City Miramar	State FL	Zip Code 33023
Purpose of Disbursement Political Consultinging		Amount of Each Disbursement this Period 2752.00
Candidate Name		Transaction ID : SB17.6538
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Harden, James, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021
Mailing Address 425 NW 15th Terrace		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33311
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 800.00
Candidate Name		Transaction ID : SB17.6758
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Harden, James, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2021
Mailing Address 425 NW 15th Terrace		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33311
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 800.00
Candidate Name		Transaction ID : SB17.6759
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4352.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Harden, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2021		
Mailing Address 425 NW 15th Terrace			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33311	Amount of Each Disbursement this Period 800.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6760		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Harden, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021		
Mailing Address 727 W Tiffany Drive			FEC Identification Number C		
City Mangonia Park	State FL	Zip Code 33407	Amount of Each Disbursement this Period 1950.00		
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6770		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Harden, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021		
Mailing Address 425 NW 15th Terrace			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33311	Amount of Each Disbursement this Period 800.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6761		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Harden, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021		
Mailing Address 425 NW 15th Terrace			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33311	Amount of Each Disbursement this Period 400.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6762		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Harden, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2021		
Mailing Address 727 W Tiffany Drive			FEC Identification Number C		
City Mangonia Park	State FL	Zip Code 33407	Amount of Each Disbursement this Period 1750.00		
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6771		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Harden, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021		
Mailing Address 1601 SE 1st Street			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33301	Amount of Each Disbursement this Period 491.94		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6764		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2641.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Harden, James, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021
Mailing Address 425 NW 15th Terrace		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33311
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 400.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6765
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Harden, James, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021
Mailing Address 425 NW 15th Terrace		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33311
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 400.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6766
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Hilton West Palm Beach		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2021
Mailing Address 600 Okeechobee Blvd		FEC Identification Number C C00677492
City West Palm Beach FL	State FL	Zip Code 33401
Purpose of Disbursement Travel	Category/ Type	
Candidate Name SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC	Amount of Each Disbursement this Period 234.73	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6989
State: FL District: 20	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1034.73
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Hilton West Palm Beach			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2021	
Mailing Address 600 Okeechobee Blvd			FEC Identification Number C C00677492	
City West Palm Beach FL	State FL	Zip Code 33401	Amount of Each Disbursement this Period 11.70	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : SB17.6990	
Candidate Name SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: FL District: 20				

Full Name (Last, First, Middle Initial) B. HKS Consulting Group Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2021	
Mailing Address 8170 SW 24th Place			FEC Identification Number C	
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 4700.00	
Purpose of Disbursement Signs		Category/ Type	Transaction ID : SB17.7025	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. HKS Consulting Group Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2021	
Mailing Address 8170 SW 24th Place			FEC Identification Number C	
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 4082.00	
Purpose of Disbursement Signs		Category/ Type	Transaction ID : SB17.7026	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	8793.70
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 251			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. HKS Consulting Group Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2021		
Mailing Address 8170 SW 24th Place			FEC Identification Number C		
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 9500.00		
Purpose of Disbursement Signs		Category/ Type	Transaction ID : SB17.7027		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. HKS Consulting Group Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2021		
Mailing Address 8170 SW 24th Place			FEC Identification Number C		
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 7300.00		
Purpose of Disbursement Signs		Category/ Type	Transaction ID : SB17.7028		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. HKS Consulting Group Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021		
Mailing Address 8170 SW 24th Place			FEC Identification Number C		
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 4200.00		
Purpose of Disbursement Signs		Category/ Type	Transaction ID : SB17.7029		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	21000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. HKS Consulting Group Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021		
Mailing Address 8170 SW 24th Place			FEC Identification Number C		
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 4550.00		
Purpose of Disbursement Signs		Category/ Type	Transaction ID : SB17.7030		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Howard, Willis, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021		
Mailing Address 15700 NW 37th Ct.			FEC Identification Number C		
City Miami Gardens	State FL	Zip Code 33054	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Campaign Management		Category/ Type	Transaction ID : SB17.6542		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Howard, Willis, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021		
Mailing Address 15700 NW 37th Ct.			FEC Identification Number C		
City Miami Gardens	State FL	Zip Code 33054	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Campaign Management		Category/ Type	Transaction ID : SB17.6543		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	▶	14550.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Hubbard Radio		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021
Mailing Address 701 Northpoint Pkwy #500		FEC Identification Number C
City West Palm Beach FL	State FL	Zip Code 33407
Purpose of Disbursement Radio	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7222
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Human Scale Strategies		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021
Mailing Address 1114 Avenue of the Americas 15th F		FEC Identification Number C
City New York	State NY	Zip Code 10036
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 700.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6975
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. ID90Travel.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021
Mailing Address 925 S Kimball Ave #140		FEC Identification Number C
City Southlake	State TX	Zip Code 76092
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 864.93	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7241
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5564.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Iheartmedia			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021	
Mailing Address 7601 Riviera Blvd			FEC Identification Number C	
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 5182.00	
Purpose of Disbursement Radio Buy		Category/ Type	Transaction ID : SB17.7230	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Iheartmedia			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021	
Mailing Address 7601 Riviera Blvd			FEC Identification Number C	
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 13592.00	
Purpose of Disbursement Radio Buy		Category/ Type	Transaction ID : SB17.7231	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Iheartmedia			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021	
Mailing Address 7601 Riviera Blvd			FEC Identification Number C	
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 3895.00	
Purpose of Disbursement Radio Buy		Category/ Type	Transaction ID : SB17.7254	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	22669.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Iheartmedia		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021
Mailing Address 7601 Riviera Blvd		FEC Identification Number C
City Miramar	State FL	Zip Code 33023
Purpose of Disbursement Radio Buy	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 12001.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7255
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Iheartmedia		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021
Mailing Address 7601 Riviera Blvd		FEC Identification Number C
City Miramar	State FL	Zip Code 33023
Purpose of Disbursement Radio Buy	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 60.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7256
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Image Plus Graphics		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2021
Mailing Address 1440 NE 131st Street		FEC Identification Number C
City North Miami	State FL	Zip Code 33161
Purpose of Disbursement Direct Mail	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 38000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7032
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	50061.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Inside Publications		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2021
Mailing Address 1050 Crown Pointe Pkwy #1240		FEC Identification Number C
City Atlanta	State GA	Zip Code 30338
Purpose of Disbursement Print Ad		Amount of Each Disbursement this Period 995.00
Candidate Name		Transaction ID : SB17.7122
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Inside Publications		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2021
Mailing Address 1050 Crown Pointe Pkwy #1240		FEC Identification Number C
City Atlanta	State GA	Zip Code 30338
Purpose of Disbursement Print Ad		Amount of Each Disbursement this Period 2500.00
Candidate Name		Transaction ID : SB17.7203
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Island T.V.		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2021
Mailing Address PO BOX 278042		FEC Identification Number C
City Miramar	State FL	Zip Code 33027
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 20000.00
Candidate Name		Transaction ID : SB17.7228
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	23495.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Jackson, Lori, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 2480 NW 12 Ct			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 558.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6670		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Jackson, Tiffany, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2021		
Mailing Address 2271 SW 84th Way			FEC Identification Number C		
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 471.15		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6569		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. JA Marketing			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 616 Clearwater Park Rd #213			FEC Identification Number C		
City West Palm Beach	State FL	Zip Code 33401	Amount of Each Disbursement this Period 12530.00		
Purpose of Disbursement Radio Buy		Category/ Type	Transaction ID : SB17.7238		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	13559.15
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. JA Marketing			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 616 Clearwater Park Rd #213			FEC Identification Number C		
City West Palm Beach	State FL	Zip Code 33401	Amount of Each Disbursement this Period 22840.00		
Purpose of Disbursement Radio Buy		Category/Type	Transaction ID : SB17.7249		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Jesus You Outreach Ministries Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2021		
Mailing Address 2831 Avenue S			FEC Identification Number C		
City Riviera Beach	State FL	Zip Code 33404	Amount of Each Disbursement this Period 306.00		
Purpose of Disbursement Donation		Category/Type	Transaction ID : SB17.6992		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Johnson, Martena, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2021		
Mailing Address 12967 SW 30th St			FEC Identification Number C		
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 288.75		
Purpose of Disbursement Wages		Category/Type	Transaction ID : SB17.6654		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	23434.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Johnson, Martena, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021
Mailing Address 12967 SW 30th St		FEC Identification Number C
City Miramar	State FL	Zip Code 33027
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 307.50
Candidate Name		Transaction ID : SB17.6655
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Jones, Lee Otis, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021
Mailing Address 1668 NW 17th Ave #7		FEC Identification Number C
City Pompano Beach	State FL	Zip Code 33069
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 232.50
Candidate Name		Transaction ID : SB17.6675
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Jones, Lee Otis, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2021
Mailing Address 1668 NW 17th Ave #7		FEC Identification Number C
City Pompano Beach	State FL	Zip Code 33069
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 520.00
Candidate Name		Transaction ID : SB17.6676
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1060.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Jones, Lee Otis, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021	
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C	
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 390.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6677	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Jones, Lee Otis, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2021	
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C	
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 510.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6678	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Jones, Lee Otis, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021	
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C	
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 1050.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6679	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1950.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Jones, Lee Otis, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021		
Mailing Address 1668 NW 17th Ave #7			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 315.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6680		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Jules, Guerda, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2021		
Mailing Address 7331 Plantation Blvd			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 574.56		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6791		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Jules, Guerda, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2021		
Mailing Address 3362 NW 22nd Ct			FEC Identification Number C		
City Lauderdale Lakes	State FL	Zip Code 33311	Amount of Each Disbursement this Period 389.70		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6795		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1279.26
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Jules, Guerda, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021		
Mailing Address 7331 Plantation Blvd			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6792		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Jules, Guerda, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 7331 Plantation Blvd			FEC Identification Number C		
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 680.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6793		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. King, Raquel, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021		
Mailing Address 5833 Gypsum Place			FEC Identification Number C		
City West Palm Beach	State FL	Zip Code 33413	Amount of Each Disbursement this Period 228.06		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6630		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1408.06
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. King, Raquel, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 5833 Gypsum Place			FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33413	Amount of Each Disbursement this Period 180.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6631	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Kronos Films			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2021	
Mailing Address 12600 SW 5th Ct #415			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Video Production		Category/ Type	Transaction ID : SB17.7097	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Kronos Films			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2021	
Mailing Address 12600 SW 5th Ct #415			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Video Production		Category/ Type	Transaction ID : SB17.7152	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3680.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Kronos Films			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2021		
Mailing Address 12600 SW 5th Ct #415			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Video Production		Category/ Type	Transaction ID : SB17.7162		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Kronos Films			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2021		
Mailing Address 12600 SW 5th Ct #415			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Video Production		Category/ Type	Transaction ID : SB17.7171		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Kronos Films			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2021		
Mailing Address 12600 SW 5th Ct #415			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Video Production		Category/ Type	Transaction ID : SB17.6949		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	▶	4500.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 151 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Kronos Films		Date of Disbursement
Mailing Address 12600 SW 5th Ct #415		M M / D D / Y Y Y Y 09 / 02 / 2021
City Pembroke Pines	State FL	Zip Code 33027
Purpose of Disbursement Video Production	Category/ Type	
Candidate Name		FEC Identification Number C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 1500.00
State: District:		Transaction ID : SB17.6950 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Kronos Films		Date of Disbursement
Mailing Address 12600 SW 5th Ct #415		M M / D D / Y Y Y Y 09 / 09 / 2021
City Pembroke Pines	State FL	Zip Code 33027
Purpose of Disbursement Video Production	Category/ Type	
Candidate Name		FEC Identification Number C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 1500.00
State: District:		Transaction ID : SB17.7199 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Kronos Films		Date of Disbursement
Mailing Address 12600 SW 5th Ct #415		M M / D D / Y Y Y Y 09 / 16 / 2021
City Pembroke Pines	State FL	Zip Code 33027
Purpose of Disbursement Video Production	Category/ Type	
Candidate Name		FEC Identification Number C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 1500.00
State: District:		Transaction ID : SB17.6951 <input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Kronos Films			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021	
Mailing Address 12600 SW 5th Ct #415			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Video Production		Category/ Type	Transaction ID : SB17.7217	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Kronos Films			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021	
Mailing Address 12600 SW 5th Ct #415			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1300.00	
Purpose of Disbursement Video Production		Category/ Type	Transaction ID : SB17.7223	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Kronos Films			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021	
Mailing Address 12600 SW 5th Ct #415			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Video Production		Category/ Type	Transaction ID : SB17.7233	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Kronos Films		Date of Disbursement
Mailing Address 12600 SW 5th Ct #415		M M / D D / Y Y Y Y 10 / 07 / 2021
City Pembroke Pines	State FL	FEC Identification Number C
Zip Code 33027		Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement Video Production	Category/Type	Transaction ID : SB17.6952
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	
State: District:		

Full Name (Last, First, Middle Initial) B. Leblanc, Nadege, , ,		Date of Disbursement
Mailing Address 6020 NW 44th St. #202		M M / D D / Y Y Y Y 08 / 06 / 2021
City Lauderhill	State FL	FEC Identification Number C
Zip Code 33319		Amount of Each Disbursement this Period 788.00
Purpose of Disbursement Wages	Category/Type	Transaction ID : SB17.6640
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	
State: District:		

Full Name (Last, First, Middle Initial) C. Lespri Enterprises Inc		Date of Disbursement
Mailing Address 1285 W Dixie Hwy Floor 2		M M / D D / Y Y Y Y 09 / 27 / 2021
City North Miami	State FL	FEC Identification Number C
Zip Code 33161		Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Advertising-Radio	Category/Type	Transaction ID : SB17.7017
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	7288.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Lespri Enterprises Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 1285 W Dixie Hwy Floor 2			FEC Identification Number C		
City North Miami	State FL	Zip Code 33161	Amount of Each Disbursement this Period 6200.00		
Purpose of Disbursement Advertising-Radio		Category/ Type	Transaction ID : SB17.7018		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Lespri Enterprises Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 1285 W Dixie Hwy Floor 2			FEC Identification Number C		
City North Miami	State FL	Zip Code 33161	Amount of Each Disbursement this Period 1200.00		
Purpose of Disbursement Advertising-Radio		Category/ Type	Transaction ID : SB17.7019		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Lespri Enterprises Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 1285 W Dixie Hwy Floor 2			FEC Identification Number C		
City North Miami	State FL	Zip Code 33161	Amount of Each Disbursement this Period 1325.00		
Purpose of Disbursement Advertising-Radio		Category/ Type	Transaction ID : SB17.7020		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8725.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 155 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Lespri Enterprises Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 1285 W Dixie Hwy Floor 2			FEC Identification Number C	
City North Miami	State FL	Zip Code 33161	Amount of Each Disbursement this Period 6200.00	
Purpose of Disbursement Advertising-Radio		Category/ Type	Transaction ID : SB17.7021	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Little Angels Learning Center			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021	
Mailing Address 2927 Ranch House Rd			FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33406	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Donation		Category/ Type	Transaction ID : SB17.7009	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Los Perez Invest LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021	
Mailing Address 10891 SW 181st Terrace			FEC Identification Number C	
City Palmetto Bay	State FL	Zip Code 33157	Amount of Each Disbursement this Period 2778.22	
Purpose of Disbursement Office Rent		Category/ Type	Transaction ID : SB17.7011	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	9978.22
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 156 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Los Perez Invest LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021	
Mailing Address 10891 SW 181st Terrace			FEC Identification Number C	
City Palmetto Bay	State FL	Zip Code 33157	Amount of Each Disbursement this Period 1825.00	
Purpose of Disbursement Office Rent		Category/Type	Transaction ID : SB17.7012	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Los Perez Invest LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021	
Mailing Address 10891 SW 181st Terrace			FEC Identification Number C	
City Palmetto Bay	State FL	Zip Code 33157	Amount of Each Disbursement this Period 1625.00	
Purpose of Disbursement Office Rent		Category/Type	Transaction ID : SB17.7013	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Louissaint, Janeshq, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021	
Mailing Address 425 NW 15th Terrace			FEC Identification Number C	
City Fort Lauderdale	State FL	Zip Code 33311	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Wages		Category/Type	Transaction ID : SB17.6756	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	4950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Luster, Deshonae, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021
Mailing Address 2805 S Oakland Forest Dr #301		FEC Identification Number C
City Oakland	State FL	Zip Code 33223
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 880.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6836
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Luster, Deshonae, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021
Mailing Address 2805 S Oakland Forest Dr #301		FEC Identification Number C
City Oakland	State FL	Zip Code 33223
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1020.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6837
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Luster, Deshonae, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021
Mailing Address 2805 S Oakland Forest Dr #301		FEC Identification Number C
City Oakland	State FL	Zip Code 33223
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 447.45	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6838
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2347.45
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Luster, Deshonae, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2021
Mailing Address 2805 S Oakland Forest Dr #301		FEC Identification Number C
City Oakland	State FL	Zip Code 33223
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 1035.00
Candidate Name		Transaction ID : SB17.6839
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) B. Luster, Deshonae, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2021
Mailing Address 2805 S Oakland Forest Dr #301		FEC Identification Number C
City Oakland	State FL	Zip Code 33223
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 2286.00
Candidate Name		Transaction ID : SB17.6840
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) C. Luster, Deshonae, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021
Mailing Address 2805 S Oakland Forest Dr #301		FEC Identification Number C
City Oakland	State FL	Zip Code 33223
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 150.00
Candidate Name		Transaction ID : SB17.6841
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3471.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 159 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Luster, Deshonae, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021	
Mailing Address 2805 S Oakland Forest Dr #301			FEC Identification Number C	
City Oakland	State FL	Zip Code 33223	Amount of Each Disbursement this Period 230.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6842	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Luster, Deshonae, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021	
Mailing Address 2805 S Oakland Forest Dr #301			FEC Identification Number C	
City Oakland	State FL	Zip Code 33223	Amount of Each Disbursement this Period 345.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6843	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Luster, Deshonae, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021	
Mailing Address 2805 S Oakland Forest Dr #301			FEC Identification Number C	
City Oakland	State FL	Zip Code 33223	Amount of Each Disbursement this Period 484.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6844	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1059.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Luster, Deshonae, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021		
Mailing Address 2805 S Oakland Forest Dr #301			FEC Identification Number C		
City Oakland	State FL	Zip Code 33223	Amount of Each Disbursement this Period 920.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6845		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Luster, Deshonae, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 2805 S Oakland Forest Dr #301			FEC Identification Number C		
City Oakland	State FL	Zip Code 33223	Amount of Each Disbursement this Period 460.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6846		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Luster, Deshonae, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021		
Mailing Address 2805 S Oakland Forest Dr #301			FEC Identification Number C		
City Oakland	State FL	Zip Code 33223	Amount of Each Disbursement this Period 690.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6847		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	2070.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Luster, Deshonae, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021
Mailing Address 2805 S Oakland Forest Dr #301		FEC Identification Number C
City Oakland	State FL	Zip Code 33223
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 1104.00
Candidate Name		Transaction ID : SB17.6848
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) B. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021
Mailing Address 675 Ponce De Leon Ave #5000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30308
Purpose of Disbursement Email Software		Amount of Each Disbursement this Period 94.98
Candidate Name		Transaction ID : SB17.7157
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) C. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2021
Mailing Address 675 Ponce De Leon Ave #5000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30308
Purpose of Disbursement Email Software		Amount of Each Disbursement this Period 94.98
Candidate Name		Transaction ID : SB17.7196
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	1293.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 162 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021
Mailing Address 675 Ponce De Leon Ave #5000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30308
Purpose of Disbursement Email Software		Amount of Each Disbursement this Period 94.98
Candidate Name		Transaction ID : SB17.7250
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Mann, Kenyall, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021
Mailing Address 727 W Tiffany Dr #3		FEC Identification Number C
City Mangonia Park	State FL	Zip Code 33407
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 768.00
Candidate Name		Transaction ID : SB17.6689
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Marssianvil, Amber, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2021
Mailing Address 2911 NW 56th Ave #C1		FEC Identification Number C
City Lauderhill	State FL	Zip Code 33313
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 150.00
Candidate Name		Transaction ID : SB17.6940
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1012.98
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 163 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Masseria, Maritza, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021	
Mailing Address 13020 SW 30th Court			FEC Identification Number C	
City Davie	State FL	Zip Code 33330	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6657	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Masseria, Maritza, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 13020 SW 30th Court			FEC Identification Number C	
City Davie	State FL	Zip Code 33330	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6658	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. McCormick, Twana, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021	
Mailing Address 4593 SW 132nd Ave			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 3200.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6551	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 164 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. McCormick, Twana, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2021	
Mailing Address 4593 SW 132nd Ave			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1600.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6552	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. McCormick, Twana, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021	
Mailing Address 4593 SW 132nd Ave			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6553	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. McCormick, Twana, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021	
Mailing Address 4593 SW 132nd Ave			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6554	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	3200.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 165 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. McCormick, Twana, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2021	
Mailing Address 4593 SW 132nd Ave			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6555	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. McCormick, Twana, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2021	
Mailing Address 4593 SW 132nd Ave			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6556	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. McCormick, Twana, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2021	
Mailing Address 4593 SW 132nd Ave			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6557	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 166 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. McCormick Law Firm		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2021
Mailing Address 2191 Defense Hwy #404		FEC Identification Number C
City Crofton	State MD	Zip Code 21114
Purpose of Disbursement Returned Contribution		Amount of Each Disbursement this Period 2900.00
Candidate Name		Transaction ID : SB17.7036
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. McCormick Law Firm		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2021
Mailing Address 2191 Defense Hwy #404		FEC Identification Number C
City Crofton	State MD	Zip Code 21114
Purpose of Disbursement Returned Contribution		Amount of Each Disbursement this Period 2900.00
Candidate Name		Transaction ID : SB17.7037
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Meachnight, Mathieu, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2021
Mailing Address 4390 NW 36th St		FEC Identification Number C
City Lauderdale Lakes	State FL	Zip Code 33319
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 322.50
Candidate Name		Transaction ID : SB17.6647
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6122.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Meachnight, Mathieu, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2021		
Mailing Address 4390 NW 36th St			FEC Identification Number C		
City Lauderdale Lakes	State FL	Zip Code 33319	Amount of Each Disbursement this Period 271.20		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6648		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Meachnight, Mathieu, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2021		
Mailing Address 4390 NW 36th St			FEC Identification Number C		
City Lauderdale Lakes	State FL	Zip Code 33319	Amount of Each Disbursement this Period 403.75		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6649		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Meachnight, Mathieu, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021		
Mailing Address 4390 NW 36th St			FEC Identification Number C		
City Lauderdale Lakes	State FL	Zip Code 33319	Amount of Each Disbursement this Period 592.56		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6650		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1267.51
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Meachnight, Mathieu, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021		
Mailing Address 4390 NW 36th St			FEC Identification Number C		
City Lauderdale Lakes	State FL	Zip Code 33319	Amount of Each Disbursement this Period 585.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6651		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Meachnight, Mathieu, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 4390 NW 36th St			FEC Identification Number C		
City Lauderdale Lakes	State FL	Zip Code 33319	Amount of Each Disbursement this Period 545.40		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6652		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Milfort, Olmikatha, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 1934 SW 29th Ave			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33312	Amount of Each Disbursement this Period 662.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6636		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1792.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Morigene, Medijna, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 1 Southern Cross Lane #207			FEC Identification Number C		
City Boynton Beach	State FL	Zip Code 33436	Amount of Each Disbursement this Period 54.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6645		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Navarrete, Jorgina, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 9055 SW 73rd Court			FEC Identification Number C		
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 1600.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6735		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. NBC 6 WTVJ6			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2021		
Mailing Address 10701 SW 90th Ave			FEC Identification Number C		
City Miami	State FL	Zip Code 33176	Amount of Each Disbursement this Period 850.00		
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.6956		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2504.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. NBC 6 WTVJ6			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2021		
Mailing Address 10701 SW 90th Ave					
City Miami	State FL	Zip Code 33176	FEC Identification Number C		
Purpose of Disbursement TV Buy			Amount of Each Disbursement this Period 4250.00		
Candidate Name			Transaction ID : SB17.6957		
Office Sought:	House Senate President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) B. NBC 6 WTVJ6			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2021		
Mailing Address 10701 SW 90th Ave					
City Miami	State FL	Zip Code 33176	FEC Identification Number C		
Purpose of Disbursement TV Buy			Amount of Each Disbursement this Period 20000.00		
Candidate Name			Transaction ID : SB17.6958		
Office Sought:	House Senate President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) C. NBC 6 WTVJ6			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021		
Mailing Address 10701 SW 90th Ave					
City Miami	State FL	Zip Code 33176	FEC Identification Number C		
Purpose of Disbursement TV Buy			Amount of Each Disbursement this Period 12091.25		
Candidate Name			Transaction ID : SB17.6959		
Office Sought:	House Senate President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item		
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....▶	36341.25
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. NBC 6 WTVJ6			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021		
Mailing Address 10701 SW 90th Ave					
City Miami	State FL	Zip Code 33176	FEC Identification Number C		
Purpose of Disbursement TV Buy			Amount of Each Disbursement this Period 12091.25		
Candidate Name			Transaction ID : SB17.6960		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. NBC 6 WTVJ6			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 10701 SW 90th Ave					
City Miami	State FL	Zip Code 33176	FEC Identification Number C		
Purpose of Disbursement TV Buy			Amount of Each Disbursement this Period 1700.00		
Candidate Name			Transaction ID : SB17.6961		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. NBC 6 WTVJ6			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 10701 SW 90th Ave					
City Miami	State FL	Zip Code 33176	FEC Identification Number C		
Purpose of Disbursement TV Buy			Amount of Each Disbursement this Period 12028.00		
Candidate Name			Transaction ID : SB17.6962		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	25819.25
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 172 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. NBC 6 WTVJ6			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021	
Mailing Address 10701 SW 90th Ave			FEC Identification Number C	
City Miami	State FL	Zip Code 33176	Amount of Each Disbursement this Period 13728.00	
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.6963	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Numero			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2021	
Mailing Address 200 Spectrum Center Drive Suite 30			FEC Identification Number C	
City Irvine	State CA	Zip Code 92618	Amount of Each Disbursement this Period 1250.00	
Purpose of Disbursement Fundraising Software		Category/ Type	Transaction ID : SB17.7081	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Numero			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021	
Mailing Address 200 Spectrum Center Drive Suite 30			FEC Identification Number C	
City Irvine	State CA	Zip Code 92618	Amount of Each Disbursement this Period 1250.00	
Purpose of Disbursement Fundraising Software		Category/ Type	Transaction ID : SB17.7129	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	16228.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Numero		M M / D D / Y Y Y Y 09 / 02 / 2021	
Mailing Address 200 Spectrum Center Drive Suite 30		FEC Identification Number	
City Irvine	State CA	Zip Code 92618	C
Purpose of Disbursement Fundraising Software		Amount of Each Disbursement this Period	
Candidate Name		1250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.7187	
Disbursement For: 2022		<input type="checkbox"/> Memo Item	
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) S			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Outfront Media		M M / D D / Y Y Y Y 08 / 02 / 2021	
Mailing Address 8530 NW 23rd St		FEC Identification Number	
City Doral	State FL	Zip Code 33126	C
Purpose of Disbursement Billboard Buy		Amount of Each Disbursement this Period	
Candidate Name		5850.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.7136	
Disbursement For: 2022		<input type="checkbox"/> Memo Item	
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) S			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Outfront Media		M M / D D / Y Y Y Y 09 / 29 / 2021	
Mailing Address 2640 NW 17th Lane		FEC Identification Number	
City Pompano Beach	State FL	Zip Code 33064	C
Purpose of Disbursement Advertising-TV		Amount of Each Disbursement this Period	
Candidate Name		32700.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.6947	
Disbursement For: 2022		<input type="checkbox"/> Memo Item	
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) S			
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	39800.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 174 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Pernick & Associates			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2021	
Mailing Address 1616 Sheridan Rd #2H			FEC Identification Number C	
City Wilmatt	State WI	Zip Code 60091	Amount of Each Disbursement this Period 26040.00	
Purpose of Disbursement Call Center		Category/ Type	Transaction ID : SB17.7054	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Pierre, Samuel, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021	
Mailing Address 2153 SW 87th Terrace			FEC Identification Number C	
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6603	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Pierre, Samuel, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 2153 SW 87th Terrace			FEC Identification Number C	
City Miramar	State FL	Zip Code 33025	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6604	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	31040.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 175 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Pritchett, Carter, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021	
Mailing Address 6601 Bayshore Road N			FEC Identification Number C	
City Fort Myers	State FL	Zip Code 33917	Amount of Each Disbursement this Period 6600.00	
Purpose of Disbursement Billboard Buy		Category/ Type	Transaction ID : SB17.6895	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Radio, Hubbard, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2021	
Mailing Address 7331 Plantation Blvd			FEC Identification Number C	
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 314.50	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6789	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Ritchie, Rochelle, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2021	
Mailing Address 207 W Harrison St			FEC Identification Number C	
City Chicago	State IL	Zip Code 60607	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6620	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	9914.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 176 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Ritchie, Rochelle, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 207 W Harrison St			FEC Identification Number C	
City Chicago	State IL	Zip Code 60607	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6621	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Roberts, Erika, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 2500 NW 12th Street			FEC Identification Number C	
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 594.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6808	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Robertson, Jerry, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2021	
Mailing Address 9055 SW 73rd Court			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 1600.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6737	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5194.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 177 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Robertson, Jerry, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2021	
Mailing Address 9055 SW 73rd Court			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6738	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Rodriguez, Marilyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2021	
Mailing Address 9326 NW 9th Ave			FEC Identification Number C	
City Plantation	State FL	Zip Code 33324	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6660	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Rodriguez, Marilyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2021	
Mailing Address 9326 NW 9th Ave			FEC Identification Number C	
City Plantation	State FL	Zip Code 33324	Amount of Each Disbursement this Period 135.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6661	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1235.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 178 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Rodriguez, Marilyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021	
Mailing Address 9326 NW 9th Ave			FEC Identification Number C	
City Plantation	State FL	Zip Code 33324	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6662	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Rodriguez, Marilyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021	
Mailing Address 9326 NW 9th Ave			FEC Identification Number C	
City Plantation	State FL	Zip Code 33324	Amount of Each Disbursement this Period 225.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6663	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Rodriguez, Marilyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021	
Mailing Address 9326 NW 9th Ave			FEC Identification Number C	
City Plantation	State FL	Zip Code 33324	Amount of Each Disbursement this Period 340.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6664	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	865.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 179 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Rodriguez, Marilyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021	
Mailing Address 9326 NW 9th Ave			FEC Identification Number C	
City Plantation	State FL	Zip Code 33324	Amount of Each Disbursement this Period 340.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6665	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Rodriguez, Marilyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 9326 NW 9th Ave			FEC Identification Number C	
City Plantation	State FL	Zip Code 33324	Amount of Each Disbursement this Period 340.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6665	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Romeu, Jeffrey, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2021	
Mailing Address 425 NW 15th Terrace			FEC Identification Number C	
City Fort Lauderdale	State FL	Zip Code 33311	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6752	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	1480.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 180 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Romeu, Jeffrey, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2021	
Mailing Address 9055 SW 73rd Court			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 396.54	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6740	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Romeu, Jeffrey, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021	
Mailing Address 9055 SW 73rd Court			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6741	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Romeu, Jeffrey, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2021	
Mailing Address 9055 SW 73rd Court			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6742	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1996.54
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 181 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Romeu, Jeffrey, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 9055 SW 73rd Court		FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 800.00
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6743
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

Full Name (Last, First, Middle Initial) B. Romeu, Jeffrey, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2021	
Mailing Address 9055 SW 73rd Court		FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 800.00
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6744
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

Full Name (Last, First, Middle Initial) C. Romeu, Jeffrey, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 9055 SW 73rd Court		FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 800.00
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6745
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 182 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Romeu, Jeffrey, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021	
Mailing Address 9055 SW 73rd Court			FEC Identification Number C	
City Miami	State FL	Zip Code 33156	Amount of Each Disbursement this Period 5500.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6746	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Romeu, Jeffrey, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021	
Mailing Address 6537 Flagler Street			FEC Identification Number C	
City Hollywood	State FL	Zip Code 33023	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6748	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Rosume, Kethania, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021	
Mailing Address 1540 NE 143rd St.			FEC Identification Number C	
City North Miami	State FL	Zip Code 33161	Amount of Each Disbursement this Period 60.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6687	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	6560.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 183 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Safe Haven Community Resource		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021
Mailing Address 2531 Old Dixie Highway		FEC Identification Number C
City Riviera Beach	State FL	Zip Code 33404
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.7047
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Safe Haven Community Resource		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021
Mailing Address 2531 Old Dixie Highway		FEC Identification Number C
City Riviera Beach	State FL	Zip Code 33404
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.7048
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Scott, Terry, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2021
Mailing Address 7751 Meridian Street		FEC Identification Number C
City Miramar	State FL	Zip Code 33023
Purpose of Disbursement Political Consulting		Amount of Each Disbursement this Period 2801.00
Candidate Name		Transaction ID : SB17.6571
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4801.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 184 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Scott, Terry, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021	
Mailing Address 7751 Meridian Street			FEC Identification Number C	
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 3900.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6572	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Scott, Terry, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 7751 Meridian Street			FEC Identification Number C	
City Miramar	State FL	Zip Code 33023	Amount of Each Disbursement this Period 2600.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6573	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Sky Administrations			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2021	
Mailing Address 401 N. Rosemary Ave			FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33401	Amount of Each Disbursement this Period 24149.01	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.7108	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	30649.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 185 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Sky Administrations		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021
Mailing Address 161 SE 28th Ct.		FEC Identification Number C
City Boynton Beach	State FL	Zip Code 33435
Purpose of Disbursement Political Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 12685.94	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7159
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Sky Administrations		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2021
Mailing Address 161 SE 28th Ct.		FEC Identification Number C
City Boynton Beach	State FL	Zip Code 33435
Purpose of Disbursement Political Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4675.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7180
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Small, Brittany, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021
Mailing Address 810 NW 33rd Ave		FEC Identification Number C
City Lauderhill	State FL	Zip Code 33311
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 369.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6904
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	17729.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 186 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Small, Brittany, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2021	
Mailing Address 810 NW 33rd Ave			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33311	Amount of Each Disbursement this Period 369.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6905	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Small, Brittany, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021	
Mailing Address 810 NW 33rd Ave			FEC Identification Number C	
City Lauderhill	State FL	Zip Code 33311	Amount of Each Disbursement this Period 270.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6906	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Smith, Shuana, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2021	
Mailing Address 3273 Turtle Cove			FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33411	Amount of Each Disbursement this Period 5950.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6584	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6589.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 187 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Smith, Shuana, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021	
Mailing Address 3273 Turtle Cove			FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33411	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement Political Consulting		Category/ Type	Transaction ID : SB17.6585	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Smith, Weston, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 6360 SW 41st Place			FEC Identification Number C	
City Davie	State FL	Zip Code 33314	Amount of Each Disbursement this Period 7500.00	
Purpose of Disbursement Radio Buy		Category/ Type	Transaction ID : SB17.6545	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. South West Airlines			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2021	
Mailing Address 2702 Love Field Drive			FEC Identification Number C	
City Dallas	State TX	Zip Code 75235	Amount of Each Disbursement this Period 530.96	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : SB17.7056	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	12530.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Spann, Naomi, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021		
Mailing Address 1401 SW 81st Ave			FEC Identification Number C		
City Pembroke Pines	State FL	Zip Code 33027	Amount of Each Disbursement this Period 338.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6638		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Spoppable, Susan, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2021		
Mailing Address 8610 S. Southgate Shores Circle			FEC Identification Number C		
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 360.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6577		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Spoppable, Susan, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021		
Mailing Address 8610 S. Southgate Shores Circle			FEC Identification Number C		
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 324.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6578		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1022.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 189 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Sponnoble, Susan, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2021	
Mailing Address 8610 S. Southgate Shores Circle			FEC Identification Number C	
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 252.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6579	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Sponnoble, Susan, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021	
Mailing Address 8610 S. Southgate Shores Circle			FEC Identification Number C	
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 342.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6580	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Sponnoble, Susan, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021	
Mailing Address 8610 S. Southgate Shores Circle			FEC Identification Number C	
City Tamarac	State FL	Zip Code 33321	Amount of Each Disbursement this Period 75.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6581	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	669.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 190 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Sponnoble, Susan, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021
Mailing Address 8610 S. Southgate Shores Circle		FEC Identification Number C
City Tamarac	State FL	Zip Code 33321
Purpose of Disbursement Wages		Amount of Each Disbursement this Period 270.00
Candidate Name		Transaction ID : SB17.6582
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. SQUARESPACE INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2021
Mailing Address Eight Clarkson St 12th Floor		FEC Identification Number C
City New York	State NY	Zip Code 10014
Purpose of Disbursement Digital Buy		Amount of Each Disbursement this Period 4500.00
Candidate Name		Transaction ID : SB17.7120
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. SQUARESPACE INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021
Mailing Address Eight Clarkson St 12th Floor		FEC Identification Number C
City New York	State NY	Zip Code 10014
Purpose of Disbursement Digital Buy		Amount of Each Disbursement this Period 51.69
Candidate Name		Transaction ID : SB17.7194
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4821.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 191 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. The Greater Fort Lauderdale Democratic Club			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2021	
Mailing Address PO BOX 4113			FEC Identification Number C	
City Fort Lauderdale	State FL	Zip Code 33338	Amount of Each Disbursement this Period 460.00	
Purpose of Disbursement Political Donation		Category/ Type	Transaction ID : SB17.7034	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. The Palm Beach Post			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2021	
Mailing Address 275 S. Dixie Highway			FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33405	Amount of Each Disbursement this Period 1890.00	
Purpose of Disbursement Digital Buy		Category/ Type	Transaction ID : SB17.7052	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Triomphe Banquet Hall			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2021	
Mailing Address 4206 Lake Worth Rd			FEC Identification Number C	
City Lake Worth	State FL	Zip Code 33461	Amount of Each Disbursement this Period 2125.00	
Purpose of Disbursement Event Rental		Category/ Type	Transaction ID : SB17.7023	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4475.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 192 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. United Industrial Supply Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2021	
Mailing Address 2030 SW 71st Terrace			FEC Identification Number C	
City Davie	State FL	Zip Code 33317	Amount of Each Disbursement this Period 239.00	
Purpose of Disbursement Steel For Signs		Category/Type	Transaction ID : SB17.6973	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Urban Initiatives			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2021	
Mailing Address 15700 NW 37th Ct.			FEC Identification Number C	
City Miami	State FL	Zip Code 33054	Amount of Each Disbursement this Period 42000.00	
Purpose of Disbursement Digital Buy		Category/Type	Transaction ID : SB17.7125	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) c. Vallejos, Angel, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021	
Mailing Address 4363 NW 11th Street			FEC Identification Number C	
City Miami	State FL	Zip Code 33126	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement Wages		Category/Type	Transaction ID : SB17.6933	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	42489.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Vallejos, Angel, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2021		
Mailing Address 4363 NW 11th Street			FEC Identification Number C		
City Miami	State FL	Zip Code 33126	Amount of Each Disbursement this Period 540.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6934		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Vallejos, Angel, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 4363 NW 11th Street			FEC Identification Number C		
City Miami	State FL	Zip Code 33126	Amount of Each Disbursement this Period 600.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6935		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) c. Vallejos, Angel, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021		
Mailing Address 4363 NW 11th Street			FEC Identification Number C		
City Miami	State FL	Zip Code 33126	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6936		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1440.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Vallejos, Angel, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2021		
Mailing Address 4363 NW 11th Street			FEC Identification Number C		
City Miami	State FL	Zip Code 33126	Amount of Each Disbursement this Period 180.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6937		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Vareen, Wayne, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021		
Mailing Address 2420 NW 7th St.			FEC Identification Number C		
City Pompano Beach	State FL	Zip Code 33069	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6547		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Warren, Quentria, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2021		
Mailing Address 310 Kentucky Ave			FEC Identification Number C		
City Fort Lauderdale	State FL	Zip Code 33312	Amount of Each Disbursement this Period 369.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6633		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1049.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WebElect		Date of Disbursement
Mailing Address 10150 Highland Manor Dr #200		M M / D D / Y Y Y Y 08 / 17 / 2021
City Tampa	State FL	Zip Code 33610
Purpose of Disbursement Software	Category/Type	
Candidate Name	FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 610.20
State: District:	Transaction ID : SB17.6954 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WFOR		Date of Disbursement
Mailing Address 29905 Network Place		M M / D D / Y Y Y Y 07 / 06 / 2021
City Chicago	State IL	Zip Code 60673
Purpose of Disbursement TV Buy	Category/Type	
Candidate Name	FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 6610.00
State: District:	Transaction ID : SB17.7092 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WFOR		Date of Disbursement
Mailing Address 29905 Network Place		M M / D D / Y Y Y Y 08 / 04 / 2021
City Chicago	State IL	Zip Code 60673
Purpose of Disbursement TV Buy	Category/Type	
Candidate Name	FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 20000.00
State: District:	Transaction ID : SB17.7149 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	27220.20
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WFOR			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2021		
Mailing Address 29905 Network Place			FEC Identification Number C		
City Chicago	State IL	Zip Code 60673	Amount of Each Disbursement this Period 13387.50		
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7183		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. WFOR			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2021		
Mailing Address 29905 Network Place			FEC Identification Number C		
City Chicago	State IL	Zip Code 60673	Amount of Each Disbursement this Period 13387.50		
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7201		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. WFOR			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021		
Mailing Address 29905 Network Place			FEC Identification Number C		
City Chicago	State IL	Zip Code 60673	Amount of Each Disbursement this Period 18164.00		
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7225		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	44939.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 197 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WFOR		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021
Mailing Address 29905 Network Place		FEC Identification Number C
City Chicago	State IL	Zip Code 60673
Purpose of Disbursement TV Buy	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 18164.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7239
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. White, Kathrine, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021
Mailing Address 200 SW 6th Ave		FEC Identification Number C
City North Lauderdale	State FL	Zip Code 33068
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 360.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6693
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. White, Kathrine, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2021
Mailing Address 200 SW 6th Ave		FEC Identification Number C
City North Lauderdale	State FL	Zip Code 33068
Purpose of Disbursement Wages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 360.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6694
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	18884.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 198 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. White, Kathrine, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021	
Mailing Address 200 SW 6th Ave			FEC Identification Number C	
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 540.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6695	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. White, Kathrine, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2021	
Mailing Address 200 SW 6th Ave			FEC Identification Number C	
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6696	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. White, Kathrine, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2021	
Mailing Address 200 SW 6th Ave			FEC Identification Number C	
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 540.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6697	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1530.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. White, Kathrine, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2021		
Mailing Address 200 SW 6th Ave			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 360.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6698		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. White, Kathrine, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2021		
Mailing Address 200 SW 6th Ave			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 306.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6699		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. White, Kathrine, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2021		
Mailing Address 200 SW 6th Ave			FEC Identification Number C		
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 450.00		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6700		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1116.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 200 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. White, Kathrine, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2021	
Mailing Address 200 SW 6th Ave			FEC Identification Number C	
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 360.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6701	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. White, Kathrine, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 200 SW 6th Ave			FEC Identification Number C	
City North Lauderdale	State FL	Zip Code 33068	Amount of Each Disbursement this Period 378.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6702	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Williams, Fabian, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2021	
Mailing Address 14654 SW 35th Ct			FEC Identification Number C	
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 205.05	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6801	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	943.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 251			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Williams, Fabian, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 14654 SW 35th Ct			FEC Identification Number C		
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 82.50		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6802		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) B. Williams, Fabian, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2021		
Mailing Address 14654 SW 35th Ct			FEC Identification Number C		
City Miramar	State FL	Zip Code 33027	Amount of Each Disbursement this Period 82.50		
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6803		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

Full Name (Last, First, Middle Initial) C. Williams, Glenn, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2021		
Mailing Address 8895 N Military Trl #202C			FEC Identification Number C		
City Palm Beach Gardens	State FL	Zip Code 33410	Amount of Each Disbursement this Period 20000.00		
Purpose of Disbursement Digital Buy		Category/ Type	Transaction ID : SB17.6799		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	20165.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 202 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Williams, Glenn, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021
Mailing Address 3362 NW 22nd Ct		FEC Identification Number C
City Lauderdale Lakes	State FL	Zip Code 33311
Purpose of Disbursement Wages	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 506.28	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.6797
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WPBF / ABC25		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021
Mailing Address 3970 RCA Blvd Suite 7007		FEC Identification Number C
City Palm Beach Gardens	State FL	Zip Code 33410
Purpose of Disbursement TV Buy	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 12070.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7060
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WPBF / ABC25		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021
Mailing Address 3970 RCA Blvd Suite 7007		FEC Identification Number C
City Palm Beach Gardens	State FL	Zip Code 33410
Purpose of Disbursement TV Buy	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 12000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7061
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	24576.28
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 203 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPBF / ABC25		Date of Disbursement
Mailing Address 3970 RCA Blvd Suite 7007		M M / D D / Y Y Y Y 08 / 16 / 2021
City Palm Beach Gardens	State FL	Zip Code 33410
Purpose of Disbursement TV Buy	Category/ Type	
Candidate Name	FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 240.00
State: District:	Transaction ID : SB17.7062	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. WPBF / ABC25		Date of Disbursement
Mailing Address 3970 RCA Blvd Suite 7007		M M / D D / Y Y Y Y 08 / 25 / 2021
City Palm Beach Gardens	State FL	Zip Code 33410
Purpose of Disbursement TV Buy	Category/ Type	
Candidate Name	FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 8032.50
State: District:	Transaction ID : SB17.7063	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. WPBF / ABC25		Date of Disbursement
Mailing Address 3970 RCA Blvd Suite 7007		M M / D D / Y Y Y Y 09 / 08 / 2021
City Palm Beach Gardens	State FL	Zip Code 33410
Purpose of Disbursement TV Buy	Category/ Type	
Candidate Name	FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Amount of Each Disbursement this Period 8032.50
State: District:	Transaction ID : SB17.7064	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	16305.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 204 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPBF / ABC25			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021	
Mailing Address 3970 RCA Blvd Suite 7007			FEC Identification Number C	
City Palm Beach Gardens	State FL	Zip Code 33410	Amount of Each Disbursement this Period 14147.40	
Purpose of Disbursement TV Buy		Category/Type	Transaction ID : SB17.7065	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. WPBF / ABC25			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021	
Mailing Address 3970 RCA Blvd Suite 7007			FEC Identification Number C	
City Palm Beach Gardens	State FL	Zip Code 33410	Amount of Each Disbursement this Period 2849.20	
Purpose of Disbursement TV Buy		Category/Type	Transaction ID : SB17.7066	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. WPEC CBS12			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2021	
Mailing Address PO BOX 206270			FEC Identification Number C	
City Dallas	State TX	Zip Code 75320	Amount of Each Disbursement this Period 4207.50	
Purpose of Disbursement TV Buy		Category/Type	Transaction ID : SB17.7101	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	21204.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 205 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPEC CBS12		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021
Mailing Address PO BOX 206270		FEC Identification Number C
City Dallas	State TX	Zip Code 75320
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 12000.00
Candidate Name	Category/Type	Transaction ID : SB17.7137
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WPEC CBS12		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2021
Mailing Address PO BOX 206270		FEC Identification Number C
City Dallas	State TX	Zip Code 75320
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 316.50
Candidate Name	Category/Type	Transaction ID : SB17.7174
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WPEC CBS12		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2021
Mailing Address PO BOX 206270		FEC Identification Number C
City Dallas	State TX	Zip Code 75320
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 6944.50
Candidate Name	Category/Type	Transaction ID : SB17.7184
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	19261.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 206 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPEC CBS12		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021
Mailing Address PO BOX 206270		FEC Identification Number C
City Dallas	State TX	Zip Code 75320
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 6944.50
Candidate Name	Category/ Type	Transaction ID : SB17.7195
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WPEC CBS12		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2021
Mailing Address PO BOX 206270		FEC Identification Number C
City Dallas	State TX	Zip Code 75320
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 8619.00
Candidate Name	Category/ Type	Transaction ID : SB17.7210
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WPEC CBS12		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021
Mailing Address PO BOX 206270		FEC Identification Number C
City Dallas	State TX	Zip Code 75320
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 12000.00
Candidate Name	Category/ Type	Transaction ID : SB17.7226
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	27563.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 207 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPEC CBS12		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021
Mailing Address PO BOX 206270		FEC Identification Number C
City Dallas	State TX	Zip Code 75320
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 13481.91
Candidate Name	Category/Type	Transaction ID : SB17.7234
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WPEC CBS12		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021
Mailing Address PO BOX 206270		FEC Identification Number C
City Dallas	State TX	Zip Code 75320
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 5754.59
Candidate Name	Category/Type	Transaction ID : SB17.7251
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WPLG Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2021
Mailing Address 3401 W Hallandale Beach		FEC Identification Number C
City Pembroke Park	State FL	Zip Code 33023
Purpose of Disbursement TV Buy		Amount of Each Disbursement this Period 3931.25
Candidate Name	Category/Type	Transaction ID : SB17.7103
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	23167.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 208 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPLG Inc			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2021	
Mailing Address 3401 W Hallandale Beach			FEC Identification Number C	
City Pembroke Park	State FL	Zip Code 33023	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7138	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. WPLG Inc			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2021	
Mailing Address 3401 W Hallandale Beach			FEC Identification Number C	
City Pembroke Park	State FL	Zip Code 33023	Amount of Each Disbursement this Period 782.50	
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7172	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. WPLG Inc			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2021	
Mailing Address 3401 W Hallandale Beach			FEC Identification Number C	
City Pembroke Park	State FL	Zip Code 33023	Amount of Each Disbursement this Period 12155.00	
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7181	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	32937.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 209 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPLG Inc			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2021	
Mailing Address 3401 W Hallandale Beach			FEC Identification Number C	
City Pembroke Park	State FL	Zip Code 33023	Amount of Each Disbursement this Period 12155.00	
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7197	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. WPLG Inc			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021	
Mailing Address 3401 W Hallandale Beach			FEC Identification Number C	
City Pembroke Park	State FL	Zip Code 33023	Amount of Each Disbursement this Period 11339.00	
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7216	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. WPLG Inc			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2021	
Mailing Address 3401 W Hallandale Beach			FEC Identification Number C	
City Pembroke Park	State FL	Zip Code 33023	Amount of Each Disbursement this Period 19558.50	
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7235	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	43052.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 210 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPTV / NBC5		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2021	
Mailing Address 1100 Banyan Blvd.		FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33351	Amount of Each Disbursement this Period 9286.25
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7002
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

Full Name (Last, First, Middle Initial) B. WPTV / NBC5		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2021	
Mailing Address 1100 Banyan Blvd.		FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33351	Amount of Each Disbursement this Period 12000.00
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7003
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

Full Name (Last, First, Middle Initial) C. WPTV / NBC5		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2021	
Mailing Address 1100 Banyan Blvd.		FEC Identification Number C	
City West Palm Beach	State FL	Zip Code 33351	Amount of Each Disbursement this Period 6545.00
Purpose of Disbursement TV Buy		Category/ Type	Transaction ID : SB17.7004
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	27831.25
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 251			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. WPTV / NBC5		Date of Disbursement
Mailing Address 1100 Banyan Blvd.		M M / D D / Y Y Y Y 09 / 24 / 2021
City West Palm Beach	State FL	Zip Code 33351
Purpose of Disbursement TV Buy		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 12112.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7005
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. WPTV / NBC6		Date of Disbursement
Mailing Address 1100 Banyan Blvd.		M M / D D / Y Y Y Y 07 / 08 / 2021
City West Palm Beach	State FL	Zip Code 33351
Purpose of Disbursement TV Buy		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 12975.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7000
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. WSVN		Date of Disbursement
Mailing Address 1401 78th St. Causeway		M M / D D / Y Y Y Y 10 / 12 / 2021
City Miami	State FL	Zip Code 33141
Purpose of Disbursement TV Buy		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 13472.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7253
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	38560.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 212 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Wulff, Esteban, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021	
Mailing Address 12240 SW 118th Ave			FEC Identification Number C	
City Miami	State FL	Zip Code 33186	Amount of Each Disbursement this Period 400.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6805	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Wulff, Esteban, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021	
Mailing Address 12240 SW 118th Ave			FEC Identification Number C	
City Miami	State FL	Zip Code 33186	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6806	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Yacinthe, Iverson, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2021	
Mailing Address 983 SW 176th Terrace			FEC Identification Number C	
City Pembroke Pines	State FL	Zip Code 33029	Amount of Each Disbursement this Period 293.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6783	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	1493.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 213 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Yacinthe, Iverson, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2021	
Mailing Address 4577 N. Nob Hill Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 639.90	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6780	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) B. Yacinthe, Iverson, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2021	
Mailing Address 4577 N. Nob Hill Rd			FEC Identification Number C	
City Sunrise	State FL	Zip Code 33351	Amount of Each Disbursement this Period 306.00	
Purpose of Disbursement Wages		Category/ Type	Transaction ID : SB17.6781	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

Full Name (Last, First, Middle Initial) C. Yellow Entertainment & Marketing Group			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2021	
Mailing Address 2445 SW 18th Terrace #1206			FEC Identification Number C	
City Fort Lauderdale	State FL	Zip Code 33315	Amount of Each Disbursement this Period 2970.00	
Purpose of Disbursement Marketing Consulting		Category/ Type	Transaction ID : SB17.7068	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	3915.90
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 214 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Yellow Entertainment & Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2021
Mailing Address 2445 SW 18th Terrace #1206		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33315
Purpose of Disbursement Marketing Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 240.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7069
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Yellow Entertainment & Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2021
Mailing Address 2445 SW 18th Terrace #1206		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33315
Purpose of Disbursement Marketing Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1750.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7070
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Yellow Entertainment & Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2021
Mailing Address 2445 SW 18th Terrace #1206		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33315
Purpose of Disbursement Marketing Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4660.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7071
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	6650.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 215 OF 251	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. Yellow Entertainment & Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2021
Mailing Address 2445 SW 18th Terrace #1206		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33315
Purpose of Disbursement Marketing Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 5250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7072
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Yellow Entertainment & Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2021
Mailing Address 2445 SW 18th Terrace #1206		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33315
Purpose of Disbursement Marketing Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 3500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7073
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Yellow Entertainment & Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021
Mailing Address 2445 SW 18th Terrace #1206		FEC Identification Number C
City Fort Lauderdale	State FL	Zip Code 33315
Purpose of Disbursement Marketing Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 7320.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Transaction ID : SB17.7074
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	16070.00
TOTAL This Period (last page this line number only).....▶	1422700.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 216 OF 251	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. CHERFILUS-MCCORMICK, SHEILA, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2021	
Mailing Address 18612 SW 41ST STREET			FEC Identification Number C C00677492	
City MIRAMAR	State FL	Zip Code 33029	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement Loan Repayment		Category/ Type 009	Transaction ID : SB19A.7302	
Candidate Name SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary			
State: FL District: 20				

Full Name (Last, First, Middle Initial) B. CHERFILUS-MCCORMICK, SHEILA, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2021	
Mailing Address 18612 SW 41ST STREET			FEC Identification Number C C00677492	
City MIRAMAR	State FL	Zip Code 33029	Amount of Each Disbursement this Period 1980000.00	
Purpose of Disbursement Loan Repayment		Category/ Type 009	Transaction ID : SB19A.7303	
Candidate Name SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary			
State: FL District: 20				

Full Name (Last, First, Middle Initial) C. CHERFILUS-MCCORMICK, SHEILA, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2021	
Mailing Address 18612 SW 41ST STREET			FEC Identification Number C C00677492	
City MIRAMAR	State FL	Zip Code 33029	Amount of Each Disbursement this Period 19568.50	
Purpose of Disbursement Loan Repayment		Category/ Type 009	Transaction ID : SB19A.7304	
Candidate Name SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary			
State: FL District: 20				

SUBTOTAL of Disbursements This Page (optional).....▶	2019568.50
TOTAL This Period (last page this line number only).....▶	2019568.50

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4114
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item CHERFILUS-MCCORMICK, SHEILA, , ,		Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 18612 SW 41ST STREET		
City MIRAMAR	State FL	ZIP Code 33029
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS	Date Incurred M 03 / D 15 / Y 2020	Date Due M M / D D / Y 9/1/2020	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	50000.00
TOTALS This Period (last page in this line only)▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.6487**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 05 / D 20 / Y 2021	M M / D D / Y 01/13/2023	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	5000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.6488**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 05 / D 26 / Y 2021	M M / D D / Y 01/13/2023	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	5000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.6489**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7.00	0.00	7.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 06 / D 01 / Y 2021	M M / D D / Y 01/13/2023	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	7.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.6490**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 06 / D 01 / Y 2021	M M / D D / Y 01/13/2023	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	100000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.6491**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	2019568.50	- 1819568.50

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 06 / D 14 / Y 2021	M M / D D / Y 01/13/2023	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	- 1819568.50
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6492**
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 2000000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2000000.00
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TERMS	Date Incurred M 06 / D 24 / Y 2021	Date Due M M / D D / Y 01/13/2023	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	2000000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7308**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 07 ^M / D 08 ^D / Y 2021 ^Y	M M / D D / Y 12/31/2025 ^Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	5000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7309**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 07 / D 12 / Y 2021	M M / D D / Y 12/31/2025	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	25000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7310**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 07 / D 14 / Y 2021	M M / D D / Y 12/31/2025	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	25000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.7311
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 150000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150000.00
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TERMS	Date Incurred M 07 / D 21 / Y 2021	Date Due M M / D D / Y 12/31/2025	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____	
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____	
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____	
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____	

SUBTOTALS This Period This Page (optional).....	150000.00
TOTALS This Period (last page in this line only)	_____

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7312**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 45000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 45000.00
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TERMS	Date Incurred M 07 / D 29 / Y 2021	Date Due M M / D D / Y 12/31/2025	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	45000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7313**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , , <input type="checkbox"/> Memo Item		Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET		<input checked="" type="checkbox"/> Personal Funds of the Candidate
City MIRAMAR	State FL	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
60000.00	0.00	60000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 08 / D 02 / Y 2021	M M / D D / Y 12/31/2025	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	60000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7314**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
22368.38	0.00	22368.38

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 08 / D 05 / Y 2021	M M / D D / Y 12/31/2025	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	22368.38
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7315**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
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TERMS	Date Incurred M 08 / D 09 / Y 2021	Date Due M M / D D / Y 12/31/2025	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	50000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7316**
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS	Date Incurred M 08 / D 17 / Y 2021	Date Due M M / D D / Y 12/31/2025	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	10000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7317**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 08 / D 18 / Y 2021	M M / D D / Y 12/31/2025	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	20000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7318**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 08 ^M / D 19 ^D / Y 2021 Y	M M / D D / Y 12/31/25 Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	40000.00
TOTALS This Period (last page in this line only).....▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7319**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
52700.00	0.00	52700.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 08 / D 23 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	52700.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7320**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 08 / D 25 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	20000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7321**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
23000.00	0.00	23000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 08 / D 31 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	23000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7322**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
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TERMS	Date Incurred M 09 / D 01 / Y 2021	Date Due M M / D D / Y 12/31/25	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	50000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7323**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000.00	0.00	75000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 09 / D 03 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	75000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7324**
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
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TERMS	Date Incurred M 09 / D 03 / Y 2021	Date Due M M / D D / Y 12/31/25	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	20000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7325**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 09 / D 15 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	100000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7326**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 09 / D 21 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	30000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7327**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 09 / D 22 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City	State	ZIP Code
	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City	State	ZIP Code
	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City	State	ZIP Code
	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City	State	ZIP Code
	Amount Guaranteed Outstanding:	

SUBTOTALS This Period This Page (optional).....▶	30000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.7328
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item CHERFILUS-MCCORMICK, SHEILA, , ,		Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET		
City MIRAMAR	State FL	ZIP Code 33029
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
126101.63	0.00	126101.63

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 09 / D 23 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....▶	<input style="width: 100%;" type="text" value="126101.63"/>
TOTALS This Period (last page in this line only)▶	<input style="width: 100%;" type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7329**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 09 / D 24 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	30000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7330**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
94587.93	0.00	94587.93

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 09 ^M / D 27 ^D / Y 2021 Y	M M / D D / Y 12/30/25 Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	94587.93
TOTALS This Period (last page in this line only).....▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.7331
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item CHERFILUS-MCCORMICK, SHEILA, , ,		Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET		
City MIRAMAR	State FL	ZIP Code 33029
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 60000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 60000.00
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TERMS	Date Incurred M 10 / D 01 / Y 2021	Date Due M M / D D / Y 12/31/25	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____	
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____	
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____	
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____	

SUBTOTALS This Period This Page (optional).....▶	60000.00
TOTALS This Period (last page in this line only)▶	_____

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7332**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 10 / D 04 / Y 2021	M M / D D / Y 12/31/25	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	50000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.7333
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 18000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 18000.00
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TERMS	Date Incurred M 10 / D 05 / Y 2021	Date Due M M / D D / Y 12/31/25	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	18000.00
TOTALS This Period (last page in this line only)▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC** Transaction ID : **SC/10.7334**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
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TERMS	Date Incurred M 10 / D 07 / Y 2021	Date Due M M / D D / Y 12/31/25	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	20000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7335**
SHEILA CHERFILUS MCCORMICK FOR CONGRESS, INC

LOAN SOURCE Full Name (Last, First, Middle Initial) CHERFILUS-MCCORMICK, SHEILA, , ,		<input type="checkbox"/> Memo Item	Election: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 18612 SW 41ST STREET			
City MIRAMAR	State FL	ZIP Code 33029	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 152000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 152000.00
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TERMS	Date Incurred M 10 / D 08 / Y 2021	Date Due M M / D D / Y 12/31/25	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	152000.00
TOTALS This Period (last page in this line only).....▶	1744196.44

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.