

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**

**FF PAC**

ADDRESS (number and street) **611 Pennsylvania Ave SE**  
Num **143**  
 Check if different than previously reported. (ACC) **Washington** **DC** **20003**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**C** **C00669259** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

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

Election on **11** / **03** / **2020** in the State of **DC**

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

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

Election on / / in the State of

5. Covering Period **10** / **01** / **2020** through **10** / **14** / **2020**

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

Signature of Treasurer McLean, Chauncey, , , [Electronically Filed] Date **10** / **20** / **2020**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**FF PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text"/>	<input type="text" value="6882.88"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="18427465.89"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="46010250.00"/>	<input type="text" value="73651864.89"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="64437715.89"/>	<input type="text" value="73658747.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="57696032.98"/>	<input type="text" value="66917064.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6741682.91"/>	<input type="text" value="6741682.91"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="1921324.58"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**FF PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	46010250.00	73651864.89
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	46010250.00	73651864.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	46010250.00	73651864.89

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	57418103.97	65348803.82
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	277929.01	1568261.04
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	57696032.98	66917064.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	57696032.98	66917064.86

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

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

**A. Moskovitz, Dustin, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 26718  
 City San Francisco State CA Zip Code 94126-6718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Asana Inc Occupation (for Individual) Co-Founder  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **21890000.00**

Date of Receipt **10 / 01 / 2020**  
**Transaction ID : 15730612**  
 Amount of Each Receipt this Period **5000000.00**  
 Memo Item  
 Non-Contribution Account

**B. Quillin, Patty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 849 Almar Ave Ste C523  
 City Santa Cruz State CA Zip Code 95060-5875  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Philanthropist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000000.00**

Date of Receipt **10 / 14 / 2020**  
**Transaction ID : 15730623**  
 Amount of Each Receipt this Period **1000000.00**  
 Memo Item  
 Non-Contribution Account

**C. Moskovitz, Dustin, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 26718  
 City San Francisco State CA Zip Code 94126-6718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Asana Inc Occupation (for Individual) Co-Founder  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **21890000.00**

Date of Receipt **10 / 09 / 2020**  
**Transaction ID : 15730614**  
 Amount of Each Receipt this Period **5890000.00**  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>11890000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

**A. Buckley, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 529 W Poplar Ave  
 City San Mateo State CA Zip Code 94402-1133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Buckley Family Trust Occupation (for Individual) Trustee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 05 / 2020  
**Transaction ID : 15730624**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 Non-Contribution Account

**B. Buckley, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 529 W Poplar Ave  
 City San Mateo State CA Zip Code 94402-1133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vice President Communications Occupation (for Individual) Twilio  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 05 / 2020  
**Transaction ID : 15730625**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 Non-Contribution Account

**C. Bankman-Fried, Samuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 330 S Rampart Blvd Ste 260  
 City Las Vegas State NV Zip Code 89145-5754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FTX Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000000.00

Date of Receipt 10 / 07 / 2020  
**Transaction ID : 15730616**  
 Amount of Each Receipt this Period 5000000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5020000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

**A. Coxe, Simone, Otus, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 755 Page Mill Rd  
 Ste A200  
 City Palo Alto State CA Zip Code 94304-1005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CALmatters Occupation (for Individual) Board Chair  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt **10 / 05 / 2020**  
**Transaction ID : 15730626**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item  
 Non-Contribution Account

**B. Fromowitz, Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 Macoun Dr  
 City Mahwah State NJ Zip Code 07430-3204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PDx Diagnostics Occupation (for Individual) Pathologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 28 / 2020**  
**Transaction ID : 15730636**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below Non-Contribution Account

**C. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 05 / 2020**  
**Transaction ID : 15730636E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100250.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

**A. Future Forward USA Action**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 611 Pennsylvania Ave SE  
Num 143

City Washington State DC Zip Code 20003-4303

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
29310002.97

Date of Receipt  
10 / 02 / 2020  
**Transaction ID : 15730627**

Amount of Each Receipt this Period  
10000000.00

Memo Item

Non-Contribution Account

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

Mailing Address 611 Pennsylvania Ave SE  
Num 143

City Washington State DC Zip Code 20003-4303

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
29310002.97

Date of Receipt  
10 / 08 / 2020  
**Transaction ID : 15730628**

Amount of Each Receipt this Period  
10000000.00

Memo Item

Non-Contribution Account

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

Mailing Address 611 Pennsylvania Ave SE  
Num 143

City Washington State DC Zip Code 20003-4303

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
29310002.97

Date of Receipt  
10 / 09 / 2020  
**Transaction ID : 15730629**

Amount of Each Receipt this Period  
9000000.00

Memo Item

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	29000000.00
<b>TOTAL</b> This Period (last page this line number only).....	46010250.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. ASP Media LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2020
Mailing Address 59 Franklin St Apt 306		FEC Identification Number C [ ] <b>Transaction ID : 500075910</b> Amount of Each Disbursement this Period 500.00
City New York	State NY	Zip Code 10013-4026
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. The Creative Resistance LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2020
Mailing Address 61 Greenpoint Ave Ste 504		FEC Identification Number C [ ] <b>Transaction ID : 500075920</b> Amount of Each Disbursement this Period 36500.00
City Brooklyn	State NY	Zip Code 11222-1526
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Dish Network</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2020
Mailing Address 13155 Collection Center Dr		FEC Identification Number C [ ] <b>Transaction ID : 500075911</b> Amount of Each Disbursement this Period 97920.00
City Chicago	State IL	Zip Code 60693-0001
Purpose of Disbursement Non-Contribution Account: Ad Buy		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	134920.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Three Point Media**

Mailing Address 290 Broadway  
Ste 210

City Methuen State MA Zip Code 01844-6827

Purpose of Disbursement  
Non-Contribution Account: Ad Production

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
10 / 01 / 2020

FEC Identification Number  
**C**

**Transaction ID : 500075921**

Amount of Each Disbursement this Period  
26284.70

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Dish Network**

Mailing Address 13155 Collection Center Dr

City Chicago State IL Zip Code 60693-0001

Purpose of Disbursement  
Non-Contribution Account: Ad Buy

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
10 / 08 / 2020

FEC Identification Number  
**C**

**Transaction ID : 500075912**

Amount of Each Disbursement this Period  
731.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. MVAR Media LLC**

Mailing Address 1421 Prince St  
Ste 320

City Alexandria State VA Zip Code 22314-2805

Purpose of Disbursement  
Non-Contribution Account: Ad Production

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
10 / 01 / 2020

FEC Identification Number  
**C**

**Transaction ID : 500075913**

Amount of Each Disbursement this Period  
12337.76

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 39353.46

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. MVAR Media LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address 1421 Prince St Ste 320		FEC Identification Number C [REDACTED] <b>Transaction ID : 500075914</b> Amount of Each Disbursement this Period 62793.42
City Alexandria	State VA	Zip Code 22314-2805
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Interface Media Group, Inc</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2020
Mailing Address PO Box 57138		FEC Identification Number C [REDACTED] <b>Transaction ID : 500075874</b> Amount of Each Disbursement this Period - 2251.84 Reported on Schedule E.
City Washington	State DC	Zip Code 20037-0138
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Shine Creative LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2020
Mailing Address 1220 L St NW Ste Pm 100		FEC Identification Number C [REDACTED] <b>Transaction ID : 500075915</b> Amount of Each Disbursement this Period 1908.00
City Washington	State DC	Zip Code 20005-4033
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	62449.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**FF PAC**

Full Name (Last, First, Middle Initial) <b>A. Shine Creative LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address 1220 L St NW Ste Pm 100		FEC Identification Number C [REDACTED] <b>Transaction ID : 500075916</b> Amount of Each Disbursement this Period 16488.30
City Washington	State DC	Zip Code 20005-4033
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Siegel Strategies</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address 270 Broadway Apt 18C		FEC Identification Number C [REDACTED] <b>Transaction ID : 500075917</b> Amount of Each Disbursement this Period 16282.11
City New York	State NY	Zip Code 10007-2345
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Star Trax</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2020
Mailing Address 32 W 39th St FI 14		FEC Identification Number C [REDACTED] <b>Transaction ID : 500075918</b> Amount of Each Disbursement this Period 2106.42
City New York	State NY	Zip Code 10018-2158
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

34876.83

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Star Trax</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address 32 W 39th St FI 14		FEC Identification Number C [ ] <b>Transaction ID : 500075919</b> Amount of Each Disbursement this Period 6319.26
City New York	State NY	Zip Code 10018-2158
Purpose of Disbursement Non-Contribution Account: Ad Production		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2020
Mailing Address 366 Summer St		FEC Identification Number C [ ] <b>Transaction ID : 500075869</b> Amount of Each Disbursement this Period 9.88
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Non-Contribution Account: Credit Card Processing Fees		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period
City	State	Zip Code
Purpose of Disbursement		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6329.14
<b>TOTAL</b> This Period (last page this line number only).....▶	277929.01

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 33
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dish Network</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 13155 Collection Center Dr			
City Chicago	State IL	Zip Code 60693-0001	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : 1250000500</b>	
Amount Incurred This Period 119000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 119000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dish Network</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 13155 Collection Center Dr			
City Chicago	State IL	Zip Code 60693-0001	

Outstanding Balance Beginning This Period 90240.00	<b>Transaction ID : 1250000490</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90240.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Extreme Reach</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 75 2nd Ave Ste 720			
City Needham	State MA	Zip Code 02494-2826	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : 1250000501</b>	
Amount Incurred This Period 4935.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4935.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	214175.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 33
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Xandr, Inc.</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 1 Rockefeller Plz			
City New York	State NY	Zip Code 10020-2003	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : 1250000491</b>	
Amount Incurred This Period 421200.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 421200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Extreme Reach</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 75 2nd Ave Ste 720			
City Needham	State MA	Zip Code 02494-2826	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : 1250000502</b>	
Amount Incurred This Period 18900.49	Payment This Period 0.00	Outstanding Balance at Close of This Period 18900.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Xandr, Inc.</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 1 Rockefeller Plz			
City New York	State NY	Zip Code 10020-2003	

Outstanding Balance Beginning This Period 135000.00	<b>Transaction ID : 1250000372</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 135000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	575100.49
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 33
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Xandr, Inc.</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 1 Rockefeller Plz			
City New York	State NY	Zip Code 10020-2003	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : 1250000492</b>	
Amount Incurred This Period 431127.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 431127.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Xandr, Inc.</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 1 Rockefeller Plz			
City New York	State NY	Zip Code 10020-2003	

Outstanding Balance Beginning This Period 135000.00	<b>Transaction ID : 1250000403</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 135000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Waterfront Strategies</b>			Nature of Debt (Purpose): Ad Production
Mailing Address 3050 K St NW Ste 100			
City Washington	State DC	Zip Code 20007-5161	

Outstanding Balance Beginning This Period 25272.46	<b>Transaction ID : 1250000493</b>	
Amount Incurred This Period 0.00	Payment This Period 25272.46	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	566127.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 33
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Three Point Media</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 290 Broadway Ste 210			
City Methuen	State MA	Zip Code 01844-6827	

Outstanding Balance Beginning This Period	<b>Transaction ID : 1250000504</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="8010.33"/>	<input type="text" value="0.00"/>	<input type="text" value="8010.33"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dish Network</b>			Nature of Debt (Purpose): Ad Buy - Adjusted from previously reported estimates.
Mailing Address 13155 Collection Center Dr			
City Chicago	State IL	Zip Code 60693-0001	

Outstanding Balance Beginning This Period	<b>Transaction ID : 1250000404</b>	
<input type="text" value="66045.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="66045.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MVAR Media LLC</b>			Nature of Debt (Purpose): Ad Production
Mailing Address 1421 Prince St Ste 320			
City Alexandria	State VA	Zip Code 22314-2805	

Outstanding Balance Beginning This Period	<b>Transaction ID : 1250000494</b>	
<input type="text" value="13273.98"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="13273.98"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="8010.33"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 33
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Waterfront Strategies</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 3050 K St NW Ste 100			
City Washington	State DC	Zip Code 20007-5161	

Outstanding Balance Beginning This Period	<b>Transaction ID : 1250000505</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1546.05"/>	<input type="text" value="0.00"/>	<input type="text" value="1546.05"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ASP Media LLC</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 59 Franklin St Apt 306			
City New York	State NY	Zip Code 10013-4026	

Outstanding Balance Beginning This Period	<b>Transaction ID : 1250000385</b>	
<input type="text" value="32666.67"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="32666.67"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MVAR Media LLC</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 1421 Prince St Ste 320			
City Alexandria	State VA	Zip Code 22314-2805	

Outstanding Balance Beginning This Period	<b>Transaction ID : 1250000506</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="22058.63"/>	<input type="text" value="0.00"/>	<input type="text" value="22058.63"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="56271.35"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 33
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MVAR Media LLC</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 1421 Prince St Ste 320			
City Alexandria	State VA	Zip Code 22314-2805	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : 1250000507</b>	
Amount Incurred This Period 3210.41	Payment This Period 0.00	Outstanding Balance at Close of This Period 3210.41

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Xandr, Inc.</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 1 Rockefeller Plz			
City New York	State NY	Zip Code 10020-2003	

Outstanding Balance Beginning This Period 120000.00	<b>Transaction ID : 1250000487</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 120000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Xandr, Inc.</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 1 Rockefeller Plz			
City New York	State NY	Zip Code 10020-2003	

Outstanding Balance Beginning This Period 184800.00	<b>Transaction ID : 1250000488</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 184800.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	308010.41
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 33
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>4C Partners</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 718 7th St NW			
City Washington	State DC	Zip Code 20001-3782	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : 1250000498</b>	
Amount Incurred This Period 13790.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13790.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Berlin Rosen</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 15 Maiden Ln Ste 1600			
City New York	State NY	Zip Code 10038-5111	

Outstanding Balance Beginning This Period 4000.00	<b>Transaction ID : 1250000298</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Waterfront Strategies</b>			Nature of Debt (Purpose): Ad Production (Estimate)
Mailing Address 3050 K St NW Ste 100			
City Washington	State DC	Zip Code 20007-5161	

Outstanding Balance Beginning This Period 20000.00	<b>Transaction ID : 1250000369</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	37790.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 33
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dish Network</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 13155 Collection Center Dr			
City Chicago	State IL	Zip Code 60693-0001	

Outstanding Balance Beginning This Period 51200.00	Transaction ID : 1250000489	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 51200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dish Network</b>			Nature of Debt (Purpose): Ad Buy (Estimate)
Mailing Address 13155 Collection Center Dr			
City Chicago	State IL	Zip Code 60693-0001	

Outstanding Balance Beginning This Period 0.00	Transaction ID : 1250000499	
Amount Incurred This Period 104640.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 104640.00

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

Outstanding Balance Beginning This Period	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	155840.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1921324.58
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	1921324.58

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee MVAR Media LLC
Mailing Address 1421 Prince St Ste 320
City Alexandria State VA Zip Code 22314-2805
Purpose of Expenditure Ad Production (Estimate)
Name of Federal Candidate: TRUMP, DONALD, J.,
Calendar Year-To-Date Per Election for Office Sought 34463144.87
Date of Public Distribution/Dissemination 10/12/2020
Amount 3210.41
Transaction ID : 500075930
Date of Disbursement or Obligation
Disbursement For: General 2020

Full Name of Payee Waterfront Strategies
Mailing Address 3050 K St NW Ste 100
City Washington State DC Zip Code 20007-5161
Purpose of Expenditure Ad Buy
Name of Federal Candidate: BIDEN, JOSEPH R JR.,
Calendar Year-To-Date Per Election for Office Sought 32416863.92
Date of Public Distribution/Dissemination 10/13/2020
Amount 31802431.42
Transaction ID : 500074471
Date of Disbursement or Obligation
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 31802431.42
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

McLean, Chauncey, , , [Electronically Filed] Date 10/20/2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee
4C Partners
Memo Item
Date of Public Distribution/Dissemination
10 / 12 / 2020
Mailing Address
718 7th St NW
Amount
13790.00
City
Washington State
DC Zip Code
20001-3782
Purpose of Expenditure
Ad Production (Estimate)
Category/Type

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought:
House District:
Senate State:
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
MVAR Media LLC
Memo Item
Date of Public Distribution/Dissemination
10 / 05 / 2020
Mailing Address
1421 Prince St
Ste 320
Amount
14974.08
City
Alexandria State
VA Zip Code
22314-2805
Purpose of Expenditure
Ad Production
Category/Type

Name of Federal Candidate:
TRUMP, DONALD, J., ,
Support Oppose
Office Sought:
House District: 00
Senate State: 00
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
14974.08
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

McLean, Chauncey, ,

[Electronically Filed]

Date

10 / 20 / 2020

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee: Dish Network
Mailing Address: 13155 Collection Center Dr
City: Chicago, State: IL, Zip Code: 60693-0001
Purpose of Expenditure: Ad Buy
Name of Federal Candidate: TRUMP, DONALD, J.,
Calendar Year-To-Date Per Election for Office Sought: 34463144.87
Date of Public Distribution/Dissemination: 08/17/2020
Amount: 66045.00
Transaction ID: 500064652
Date of Disbursement or Obligation: 10/01/2020
Disbursement For: General 2020

Full Name of Payee: Dish Network
Mailing Address: 13155 Collection Center Dr
City: Chicago, State: IL, Zip Code: 60693-0001
Purpose of Expenditure: Ad Buy (Estimate)
Name of Federal Candidate: BIDEN, JOSEPH R JR.,
Calendar Year-To-Date Per Election for Office Sought: 32416863.92
Date of Public Distribution/Dissemination: 10/12/2020
Amount: 119000.00
Transaction ID: 500075923
Date of Disbursement or Obligation:
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures: 66045.00
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures:

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

Check if 24-hour report 48-hour report
New report Amends report filed on 10/05/2020

Full Name of Payee: People's Television, Inc
Mailing Address: 220 W 30th St, FI 2, New York, NY 10001-4948
Purpose of Expenditure: Ad Production
Category/Type:
Name of Federal Candidate: TRUMP, DONALD, J., , Oppose
Office Sought: President
Amount: 12000.00
Transaction ID: 500071723
Date of Disbursement or Obligation: 10/05/2020
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought: 34463144.87

Full Name of Payee: Ralston Lapp Media LLC
Mailing Address: 1054 31st St NW, Ste 430, Washington, DC 20007-6042
Purpose of Expenditure: Ad Production
Category/Type:
Name of Federal Candidate: TRUMP, DONALD, J., , Oppose
Office Sought: President
Amount: 9709.77
Transaction ID: 500071724
Date of Disbursement or Obligation: 10/05/2020
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought: 34463144.87

(a) SUBTOTAL of Itemized Independent Expenditures 21709.77
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Date 10/20/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee: Dish Network
Mailing Address: 13155 Collection Center Dr
City: Chicago, State: IL, Zip Code: 60693-0001
Purpose of Expenditure: Ad Buy (Estimate)
Name of Federal Candidate: TRUMP, DONALD, J.,
Disbursement For: General 2020
Amount: 104640.00
Transaction ID: 500075924

Full Name of Payee: Xandr, Inc.
Mailing Address: 1 Rockefeller Plz
City: New York, State: NY, Zip Code: 10020-2003
Purpose of Expenditure: Ad Buy (Estimate)
Name of Federal Candidate: TRUMP, DONALD, J.,
Disbursement For: General 2020
Amount: 421200.00
Transaction ID: 500075744

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Date 10 / 20 / 2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee: Extreme Reach
Mailing Address: 75 2nd Ave, Ste 720, Needham, MA 02494-2826
Purpose of Expenditure: Ad Production (Estimate)
Name of Federal Candidate: BIDEN, JOSEPH R JR, , Support
Amount: 18900.49
Transaction ID: 500075925
Date of Disbursement or Obligation: 10/12/2020
Disbursement For: General 2020

Full Name of Payee: Three Point Media
Mailing Address: 290 Broadway, Ste 210, Methuen, MA 01844-6827
Purpose of Expenditure: Ad Production
Name of Federal Candidate: TRUMP, DONALD, J., , Oppose
Amount: 15233.42
Transaction ID: 500071725
Date of Disbursement or Obligation: 10/05/2020
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 15233.42
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Date 10/20/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee Xandr, Inc.
Mailing Address 1 Rockefeller Plz
City New York State NY Zip Code 10020-2003
Purpose of Expenditure Ad Buy (Estimate)
Date of Public Distribution/Dissemination 10/12/2020
Amount 431127.00
Transaction ID : 500075745
Date of Disbursement or Obligation

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 32416863.92

Full Name of Payee Extreme Reach
Mailing Address 75 2nd Ave Ste 720
City Needham State MA Zip Code 02494-2826
Purpose of Expenditure Ad Production (Estimate)
Date of Public Distribution/Dissemination 10/05/2020
Amount 4935.00
Transaction ID : 500075926
Date of Disbursement or Obligation

Name of Federal Candidate: TRUMP, DONALD, J., ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 34463144.87

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee
Interface Media Group, Inc
Mailing Address
PO Box 57138
City
Washington State
DC Zip Code
20037-0138
Purpose of Expenditure
Ad Production
Category/Type
Name of Federal Candidate:
TRUMP, DONALD, J.,
Support Oppose
Office Sought:
President Senate
District: 00 State: 00
Calendar Year-To-Date
Per Election for Office Sought
34463144.87
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Three Point Media
Mailing Address
290 Broadway
Ste 210
City
Methuen State
MA Zip Code
01844-6827
Purpose of Expenditure
Ad Production (Estimate)
Category/Type
Name of Federal Candidate:
BIDEN, JOSEPH R JR.,
Support Oppose
Office Sought:
President Senate
District: State:
Calendar Year-To-Date
Per Election for Office Sought
32416863.92
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
2251.84
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Date 10 / 20 / 2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee: Waterfront Strategies
Mailing Address: 3050 K St NW, Ste 100, Washington, DC 20007-5161
Purpose of Expenditure: Ad Production
Category/Type:
Name of Federal Candidate: TRUMP, DONALD, J., , Support [ ], Oppose [x]
Office Sought: President [x], House [ ], Senate [ ]
District: 00, State: 00
Amount: 25272.46
Transaction ID: 500067857
Date of Disbursement or Obligation: 10/08/2020
Disbursement For: General [x], Primary [ ], Other [ ]

Full Name of Payee: Waterfront Strategies
Mailing Address: 3050 K St NW, Ste 100, Washington, DC 20007-5161
Purpose of Expenditure: Ad Production (Estimate)
Category/Type:
Name of Federal Candidate: BIDEN, JOSEPH R JR, , Support [x], Oppose [ ]
Office Sought: President [x], House [ ], Senate [ ]
District: , State:
Amount: 1546.05
Transaction ID: 500075928
Date of Disbursement or Obligation: 10/12/2020
Disbursement For: General [x], Primary [ ], Other [ ]

(a) SUBTOTAL of Itemized Independent Expenditures 25272.46
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Date 10/20/2020

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FF PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00669259
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>MVAR Media LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1421 Prince St Ste 320	Amount <input type="text"/>
City Alexandria State VA Zip Code 22314-2805	Transaction ID : <b>500067858</b>
Purpose of Expenditure Ad Production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 34463144.87	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item <b>Waterfront Strategies</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3050 K St NW Ste 100	Amount <input type="text"/>
City Washington State DC Zip Code 20007-5161	Transaction ID : <b>500072478</b>
Purpose of Expenditure Ad Buy Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 34463144.87	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 25470185.98
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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McLean, Chauncey, , ,

[Electronically Filed]

Date

/  /

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FF PAC
FEC IDENTIFICATION NUMBER
C C00669259

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

Full Name of Payee
MVAR Media LLC
Memo Item
Date of Public Distribution/Dissemination
10 / 12 / 2020
Amount
22058.63
Transaction ID : 500075929
Date of Disbursement or Obligation

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: House District:
President Senate State:
Disbursement For: Primary General
2020 Other (specify)

Full Name of Payee
Memo Item
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House District:
President Senate State:
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 57418103.97

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McLean, Chauncey, ,

[Electronically Filed]

Date 10 / 20 / 2020

Signature