

**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

NEW PAC

ADDRESS (number and street)

PO BOX 6545

Check if different  
than previously  
reported. (ACC)

VISALIA

CA

93290-6545

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00398750

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

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

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

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

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

[ ]

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

[ ]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

NUNES, TONI, DIAN, ,

Type or Print Name of Treasurer

Signature of Treasurer

NUNES, TONI, DIAN, ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

NEW PAC

Report Covering the Period:

From:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 04  |   | 01  |   | 2021      |

To:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 06  |   | 30  |   | 2021      |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <div><div>Y Y Y Y Y</div><div>2021</div></div>                                 |                         | <div>153281.67</div>              |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <div>122323.58</div>    |                                   |
| (c) Total Receipts (from Line 19) .....                                                                          | <div>435747.83</div>    | <div>565747.83</div>              |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <div>558071.41</div>    | <div>719029.50</div>              |
| 7. Total Disbursements (from Line 31).....                                                                       | <div>230352.41</div>    | <div>391310.50</div>              |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | <div>327719.00</div>    | <div>327719.00</div>              |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <div>0.00</div>         |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <div>0.00</div>         |                                   |



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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**NEW PAC**

Report Covering the Period:

From:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  | / | 01  | / | 2021    |

To:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  | / | 30  | / | 2021    |

| I. Receipts                                                                                           | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                            |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                               |                               |                                   |
| (i) Itemized (use Schedule A).....                                                                    | 11000.00                      | 16000.00                          |
| (ii) Unitemized .....                                                                                 | 100.00                        | 100.00                            |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶                                                       | 11100.00                      | 16100.00                          |
| (b) Political Party Committees .....                                                                  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                                    | 5000.00                       | 5000.00                           |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 16100.00                      | 21100.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....                                             | 419647.83                     | 544647.83                         |
| 13. All Loans Received .....                                                                          | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....                                                                     | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....                                           | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds                                                        |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....                                                      | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....                                                              | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..                                                           | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                         | 435747.83                     | 565747.83                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                   | 435747.83                     | 565747.83                         |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>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 .....                                                 | 58352.41                      | 108310.50                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 58352.41                      | 108310.50                         |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 100000.00                         |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 172000.00                     | 178000.00                         |
| 24. Independent Expenditures (use Schedule E) .....                                            | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:                                                               |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....                                                           | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                             | 0.00                          | 5000.00                           |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 5000.00                           |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))                                          |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....                                                                        | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 230352.41                     | 391310.50                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 230352.41                     | 391310.50                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                             | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....         | 16100.00                              | 21100.00                                  |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                             | 0.00                                  | 5000.00                                   |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....     | 16100.00                              | 16100.00                                  |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) .....▶ | 58352.41                              | 108310.50                                 |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                  | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....▶              | 58352.41                              | 108310.50                                 |

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3XA

Transaction ID :

AMENDING IN RESPONSE TO FEC LETTER RFAI DATED 3/14/22. CORRECTIONS TO YEAR-END REPORT  
REQUIRED CHANGES TO JULY 15 2021 REPORT.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. ASKEW, WHITAKER, , ,**

Mailing Address 7614 HOLIDAY DR

City  
ALEXANDRIA

State  
VA

Zip Code  
22308-1032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SUBJECT MATTER

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2021

Transaction ID : A531891A88D6043B3B52

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. CANNABLE LLC**

Mailing Address 470 E HERNDON AVE

City  
FRESNO

State  
CA

Zip Code  
93720-2929

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2021

Transaction ID : A8F5FA82494A34B9DAC2

Amount of Each Receipt this Period

5000.00

☐ Memo Item

NOT A CORP

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

**C. FAGUNDES, RALPH, , ,**

Mailing Address PO BOX 2717

City  
MERCED

State  
CA

Zip Code  
95344-0717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FAGUNDES DAIRY

Occupation (for Individual)

FARMER OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2021

Transaction ID : AC7D709EDD92E4709821

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

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

6000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 426

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/>                | <input type="checkbox"/>     | <input type="checkbox"/>     | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

NEW PAC

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

**A. VALLEY CREST FARMS LLC**

Mailing Address PO BOX 26930

City  
FRESNOState  
CAZip Code  
93729-6930FEC 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 ▼

5000.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 05  | 10  | 2021        |

Transaction ID : ABAFE1B09E824427EA99

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 NOT A CORP

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

**B. FAGUNDES, FRED, , ,**

Mailing Address 1978 BUSINESS PARK WAY

City  
MERCEDState  
CAZip Code  
95348-4100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FAGUNDES DAIRYOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 05  | 10  | 2021        |

Transaction ID : AAA42607D97E44F59B36

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
|     |     |             |

Amount of Each Receipt this Period

☐ Memo Item

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

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

5000.00

11000.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 426  
(check only one)

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

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. GENERAL ATOMICS PAC</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address PO BOX 22930<br>City SAN DIEGO State CA Zip Code 92192-2930<br>FEC ID number of contributing federal political committee. <b>C</b> C00215285<br>Name of Employer (for Individual) Occupation (for Individual)<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 5000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 19 / 2021<br><b>Transaction ID : AD3CECDF42CE48AF97E</b><br>Amount of Each Receipt this Period<br>5000.00<br><input type="checkbox"/> Memo Item |
| <b>B.</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address<br>City State Zip Code<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) Occupation (for Individual)<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼                                                                            |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>Amount of Each Receipt this Period<br><input type="checkbox"/> Memo Item                                                                             |
| <b>C.</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address<br>City State Zip Code<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) Occupation (for Individual)<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)<br>Aggregate Year-to-Date ▼                                                                              |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>Amount of Each Receipt this Period<br><input type="checkbox"/> Memo Item                                                                             |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | 5000.00                                                                                                                                                                                            |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 5000.00                                                                                                                                                                                            |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

**A. NUNES LEADERSHIP FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545FEC ID number of contributing  
federal political committee.

C

C00766410

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

37215.83

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 22    | / | 2021        |

Transaction ID : A0B9CA5C5648549E380A

Amount of Each Receipt this Period

37215.83

☐ Memo Item  
 JFC DISTRIBUTION

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

**B. ELLIS, STAN, , ,**

Mailing Address PO BOX 5427

City  
BAKERSFIELDState  
CAZip Code  
93388-5427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SIERRA PROCESS SYSTEMS, INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 10    | / | 2021        |

Transaction ID : A8D566D3672F6407B96E

Amount of Each Receipt this Period

5000.00

☒ Memo Item

JFC DISTRIBUTION

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

**C. DUARTE, ALEXANDRA, , ,**

Mailing Address 6706 DUSTY LN

City  
MODESTOState  
CAZip Code  
95357-1021FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TUOLUMNE RIDGE LLCOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 17    | / | 2021        |

Transaction ID : AE13A00A78C4745D8980

Amount of Each Receipt this Period

5000.00

☒ Memo Item

JFC DISTRIBUTION

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

37215.83

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. SPENCER, RICHARD, F., ,

Mailing Address 5286 E HOME AVE

City  
FRESNOState  
CAZip Code  
93727-2103FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPENCER ENTERPRISES, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4200.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 01    | / | 2021        |

Transaction ID : AD644F94F648B4D698C7

Amount of Each Receipt this Period

4200.00

☒ Memo Item

DATA ENTRY ERROR - MISSED FROM ORIGINAL REPORT.

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

B. SPENCER, RICHARD, F., ,

Mailing Address 5286 E HOME AVE

City  
FRESNOState  
CAZip Code  
93727-2103FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPENCER ENTERPRISES, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 22    | / | 2021        |

Transaction ID : AA646FA842850495AA1F

Amount of Each Receipt this Period

800.00

☒ Memo Item

JFC DISTRIBUTION

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

C. GROPPETTI, DON, , ,

Mailing Address 32595 ROAD 132  
LOT GCity  
VISALIAState  
CAZip Code  
93292-9160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SHEL-DON, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 10    | / | 2021        |

Transaction ID : AB7AD41BCF3FC4C548B7

Amount of Each Receipt this Period

5000.00

☒ Memo Item

JFC DISTRIBUTION

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

NEW PAC

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

A. GROPPETTI, SHELLY, , ,

Mailing Address 32595 ROAD 132

LOT G

City  
VISALIAState  
CAZip Code  
93292-9160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SHEL-DON, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 10    | / | 2021        |

Transaction ID : A5EA958E1939B46B5ABB

Amount of Each Receipt this Period

5000.00

☒ Memo Item

JFC DISTRIBUTION

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

B. DUARTE, JOHN, , ,

Mailing Address 6706 DUSTY LN

City  
MODESTOState  
CAZip Code  
95357-1021FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DUARTE NURSERYOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 17    | / | 2021        |

Transaction ID : A514F36BC0CD24BB28DE

Amount of Each Receipt this Period

5000.00

☒ Memo Item

JFC DISTRIBUTION

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

C. CRINKLAW, DAVE, , ,

Mailing Address 31799 DAHLEM DR

City  
EXETERState  
CAZip Code  
93221-9595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WEST STAR CONTRUCTIONOccupation (for Individual)  
CONTRACTOR - PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 05    | / | 2021        |

Transaction ID : AFA277B87400746D89D4

Amount of Each Receipt this Period

5000.00

☒ Memo Item

JFC DISTRIBUTION

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. YUROSEK, JEFFREY, , ,

Mailing Address 1903 MINERAL CT

City  
BAKERSFIELDState  
CAZip Code  
93308-6812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
YUROSEK REALTYOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 10    | 2021        |

Transaction ID : AD0B93ABE39A74A0E979

Amount of Each Receipt this Period

5000.00

☒ Memo Item

JFC DISTRIBUTION

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

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A58E2728F43DB4835BEA

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

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

C. WELBORN, ELKE, B, ,

Mailing Address 12980 HOLMES RD

City  
COLORADO SPRINGSState  
COZip Code  
80908-3352FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

362.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AA248441DA108438D871

Amount of Each Receipt this Period

150.00

☒ Memo Item

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

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

500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. WEEKS, ANNIE, H, ,

Mailing Address 6709 KEARSARGE WAY

City  
BAKERSFIELDState  
CAZip Code  
93309-3481FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A193E451CA2174F2AB34

Amount of Each Receipt this Period

75.00

☒ Memo Item

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

B. WALLACE, LYDIA, G, ,

Mailing Address 860 PLEASANT ST

City  
BIRMINGHAMState  
MIZip Code  
48009-2920FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ND INDUSTRIESOccupation (for Individual)  
EXEC ASST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A2670E14FDC2142D1B64

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

C. VOGEL, CLAUDETTE, D., ,

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEKState  
CAZip Code  
94598-4554FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AD32E4D989FF24E7DB52

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 15 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. VOGEL, CLAUDETTE, D., ,**

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEK

State  
CA

Zip Code  
94598-4554

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A56074C932CAD4304A69**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**B. VOGEL, CLAUDETTE, D., ,**

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEK

State  
CA

Zip Code  
94598-4554

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A79486F7F4F7B40DD97B**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. VOGEL, CLAUDETTE, D., ,**

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEK

State  
CA

Zip Code  
94598-4554

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A88D85BD3F4A2478BBA0**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 16 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. VOGEL, CLAUDETTE, D., ,**

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEK

State  
CA

Zip Code  
94598-4554

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A00EB99CAFC1347EEBF9**

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

**B. WATSON, JAMES, R., ,**

Mailing Address 9 TOMOKA COVE WAY

City  
ORMOND BEACH

State  
FL

Zip Code  
32174-1802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : ABA3E3489AF564585B06**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**C. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City  
RIO RANCHO

State  
NM

Zip Code  
87124-7621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.50

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A83AE6D99B66248FAB8B**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

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

0.00



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

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

FOR LINE NUMBER: PAGE 17 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

04 / 29 / 2021

Transaction ID : A6148EF18801C4946BBA

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

**B. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

04 / 29 / 2021

Transaction ID : A2CD49B94A7D14FE4886

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.50

Date of Receipt

04 / 29 / 2021

Transaction ID : A954D0C5ED6C6420C953

Amount of Each Receipt this Period

15.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. WELLS, JAMES, A, ,

Mailing Address 32109 FM 732

City  
SAN BENITOState  
TXZip Code  
78586-6626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A136644825F6D464A9DF

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

B. WHITSON, KERRY, , ,

Mailing Address 18425 AVENUE 264

City  
EXETERState  
CAZip Code  
93221-9633FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : ACF92A65695D64168BD6

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A67835922FF414E0AA34

Amount of Each Receipt this Period

1132.00

☐ Memo Item  
 TRANSFER FROM JFC

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

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

1132.00

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

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

FOR LINE NUMBER: PAGE 19 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

NEW PAC

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

A. REULMAN, CHRIS, , ,

Mailing Address PO BOX 626

City  
MORONGO VALLEY

State  
CA

Zip Code  
92256-0626

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RANGER ENTERPRISES, INC

Occupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2021

Transaction ID : A23DC9DC5283845E9943

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

B. DITRA, JOHN, ANTHONY, ,

Mailing Address 260 TRAMINER CT

City  
FREMONT

State  
CA

Zip Code  
94539-6085

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DUTRS ENTERPRISES

Occupation (for Individual)  
BOARD CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 27 / 2021

Transaction ID : A9C7BCBEE6A884727A45

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

C. LEMMERMANN, SHERRI, , ,

Mailing Address PO BOX 32837

City  
SAINT LOUIS

State  
MO

Zip Code  
63132-8837

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE GATESWORTH

Occupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 27 / 2021

Transaction ID : A1091C1D91993423EBF4

Amount of Each Receipt this Period

7.50

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. LEMMERMANN, SHERRI, , ,**

Mailing Address PO BOX 32837

City  
SAINT LOUISState  
MOZip Code  
63132-8837FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE GATESWORTHOccupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 28    | 2021        |

Transaction ID : AA51CBB5CFE0E4044BD3

Amount of Each Receipt this Period

7.50

☒ Memo Item

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

**B. LEMMERMANN, SHERRI, , ,**

Mailing Address PO BOX 32837

City  
SAINT LOUISState  
MOZip Code  
63132-8837FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE GATESWORTHOccupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 30    | 2021        |

Transaction ID : A8DFBB21AE4294570AF5

Amount of Each Receipt this Period

5.00

☒ Memo Item

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

**C. DRUST, CAROL, , ,**

Mailing Address 3501 BEECHWOOD RD

City  
GARNET VALLEYState  
PAZip Code  
19060-6816FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 27    | 2021        |

Transaction ID : A038D081A160D49C1AF5

Amount of Each Receipt this Period

37.50

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 21 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BARRO, LINO, R, ,**

Mailing Address 15006 ROCKFOLD DR

City  
HACIENDA HEIGHTS

State  
CA

Zip Code  
91745-4012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05 / 27 / 2021**

**Transaction ID : A16C406AF338F49A5809**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**B. BARRO, LINO, R, ,**

Mailing Address 15006 ROCKFOLD DR

City  
HACIENDA HEIGHTS

State  
CA

Zip Code  
91745-4012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05 / 27 / 2021**

**Transaction ID : A23E2F98210154360AB4**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**C. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.50

Date of Receipt

**05 / 27 / 2021**

**Transaction ID : ABAEC8312B6734C589A7**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 22 OF 426  
(check only one)

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

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

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

Mailing Address 407 COUNTRY CLUB RD

City  
SALINA

State  
KS

Zip Code  
67401-3508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

**05** / **27** / **2021**

**Transaction ID : A79B38E6FA0624A0E9E4**

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

Mailing Address PO BOX 698

City

CADILLAC

State

MI

Zip Code

49601-0698

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**05** / **27** / **2021**

**Transaction ID : A76D1D3868900409E8AA**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

Mailing Address 22377 CONCORD STREET

City

SOUTHFIELD

State

MI

Zip Code

48076

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

**05** / **28** / **2021**

**Transaction ID : AE34801C1FDF64CF5894**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 23 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

**Transaction ID : A83B4C17F71624131A7C**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

**Transaction ID : AF61438B60EDC48A09B6**

Amount of Each Receipt this Period

3.50

☒ Memo Item

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

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

**Transaction ID : A1971C6CFCA2C46C381C**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 OF 426  
(check only one)

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

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : ADDE445B953944D518FA

Amount of Each Receipt this Period

3.50

☒ Memo Item

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

B. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : A107ECC2444034BD687C

Amount of Each Receipt this Period

3.50

☒ Memo Item

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

C. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : AB2B160D56D0544D4AC0

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00



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

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

FOR LINE NUMBER: PAGE 25 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : A69B1485947244952B2A

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6160.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : AB930F6A8F537498FB16

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. STRICKER, SUSAN, K, ,**

Mailing Address 2930 DRIFTWOOD PL

City  
STOCKTON

State  
CA

Zip Code  
95219-8024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : AA9545A64584746FB944

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 26 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. SMITH, WILLIAM, M, ,**

Mailing Address 940 WEATHERMORE TRCE

City  
HOSCHTON

State  
GA

Zip Code  
30548-3486

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

**Transaction ID : ACEEB2D72ED8C430B8AE**

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

**B. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

**Transaction ID : AD19287CB117F4623ACD**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. HASSOLDT, WILLIAM, , ,**

Mailing Address 10 PINE TREE LN

City  
ROLLING HILLS

State  
CA

Zip Code  
90274-5012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

**Transaction ID : A4C7C023AB6984BB5BA6**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 426  
(check only one)

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

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

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

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : A4B9B6F64287B404F807

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIAN

State  
ID

Zip Code  
83646-3702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : A45F8B8592C194109B94

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

Mailing Address 7648 PEPPERTREE RD

City  
DUBLIN

State  
CA

Zip Code  
94568-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : A266F2253F336498CAF2

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 28 OF 426  
(check only one)

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

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

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

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 28 / 2021

Transaction ID : A699581F11ADE4489993

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

Mailing Address 12 WHITECLIFF

City

LAGUNA NIGUEL

State  
CA

Zip Code  
92677-9237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 29 / 2021

Transaction ID : A39D184DA006D4B20A44

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

Mailing Address 1681 BUENA VISTA DR

City

CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 29 / 2021

Transaction ID : A6AB4D2EC250C4D689CA

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 29 OF 426  
(check only one)

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

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |                                                                                                                                                                                                                        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. MALMBERG, LARRY, , ,</b></p> <p>Mailing Address <b>1000 S HIGHWAY 395</b></p> <p>City <b>HERMISTON</b> State <b>OR</b> Zip Code <b>97838-2663</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/><b>462.50</b></p>      |  |  | <p>Date of Receipt<br/> <b>05 / 29 / 2021</b><br/> <b>Transaction ID : AE6FA10DC4E0A4A55B0A</b> </p> <p>Amount of Each Receipt this Period<br/> <b>12.50</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. FRISBIE, STEVEN, , ,</b></p> <p>Mailing Address <b>PO BOX 698</b></p> <p>City <b>CADILLAC</b> State <b>MI</b> Zip Code <b>49601-0698</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/><b>350.00</b></p>               |  |  | <p>Date of Receipt<br/> <b>05 / 30 / 2021</b><br/> <b>Transaction ID : A456359285948431A959</b> </p> <p>Amount of Each Receipt this Period<br/> <b>25.00</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. FRIDRICH, HEINZ, K, ,</b></p> <p>Mailing Address <b>131 LONG POINT DR</b></p> <p>City <b>FERNANDINA BEACH</b> State <b>FL</b> Zip Code <b>32034-6410</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼<br/><b>627.50</b></p> |  |  | <p>Date of Receipt<br/> <b>05 / 30 / 2021</b><br/> <b>Transaction ID : ADE8F4F4D39CE4FC18BB</b> </p> <p>Amount of Each Receipt this Period<br/> <b>17.50</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  | <p><b>0.00</b></p>                                                                                                                                                                                                     |  |
| <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |                                                                                                                                                                                                                        |  |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. FRIDRICH, HEINZ, K, ,

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2021

Transaction ID : A07F27C0E8DA0493DB62

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

B. MCRAE, MARTHA, KAY, ,

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2021

Transaction ID : A027D7F767AFF40C787B

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

C. MCRAE, MARTHA, KAY, ,

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2021

Transaction ID : A4AA1AD7DACBC400AA4I

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 31 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.54

Date of Receipt

**05 / 30 / 2021**

**Transaction ID : A792521CEC1B4453FB7E**

Amount of Each Receipt this Period

2.50

☒ Memo Item

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

**B. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.54

Date of Receipt

**05 / 30 / 2021**

**Transaction ID : A5E4706E10F5049959DE**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

**C. RAK, HENRY, , ,**

Mailing Address 2 VILLAGE DR

City  
TRUMBULL

State  
CT

Zip Code  
06611-4800

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

**05 / 30 / 2021**

**Transaction ID : A621DAB9C2C164067B41**

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 32 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. HUMES, GLORIA, , ,**

Mailing Address PO BOX 184

City  
DELAWARE

State  
OH

Zip Code  
43015-0184

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.65

Date of Receipt

**05** / **30** / **2021**

**Transaction ID : AA7E911E494F84419AC6**

Amount of Each Receipt this Period

22.50

☒ Memo Item

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

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6164.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : A2B0E57736AC340AA822**

Amount of Each Receipt this Period

3.50

☒ Memo Item

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

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : AF82D9064654246649BB**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

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

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

1000.00



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

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

FOR LINE NUMBER: PAGE 33 OF 426  
(check only one)

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BARTSCH, ROBERT, F, , JR.**

Mailing Address 7006 BECKFORD AVE

City  
 RESEDA

State  
 CA

Zip Code  
 91335-3817

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**04** / **27** / **2021**

**Transaction ID : A29A830403C08434A8B7**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

Mailing Address 250 IDLELAKE CT

City  
 SUMTER

State  
 SC

Zip Code  
 29150-1128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **03** / **2021**

**Transaction ID : A769A25E132444696B52**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

Mailing Address PO BOX 2425

City  
 SNOWFLAKE

State  
 AZ

Zip Code  
 85937-2425

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **13** / **2021**

**Transaction ID : AEA2CB68D19944D53924**

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 34 OF 426  
(check only one)

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

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |                                                                                                                                                                                                                |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. BELEW, GLEN, , ,</b></p> <p>Mailing Address 250 IDLELAKE CT</p> <p>City SUMTER State SC Zip Code 29150-1128</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/>317.50</p>     |  |  | <p>Date of Receipt<br/> <b>05 / 25 / 2021</b><br/> <b>Transaction ID : AED9E3ECF5312419C86B</b> </p> <p>Amount of Each Receipt this Period<br/>17.50</p> <p><input checked="" type="checkbox"/> Memo Item</p>  |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. BARTLETT, MARY, JO, ,</b></p> <p>Mailing Address PO BOX 2425</p> <p>City SNOWFLAKE State AZ Zip Code 85937-2425</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/>400.00</p> |  |  | <p>Date of Receipt<br/> <b>05 / 26 / 2021</b><br/> <b>Transaction ID : A2CF0707398724D46918</b> </p> <p>Amount of Each Receipt this Period<br/>100.00</p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. BENGTON, BRUCE, P., ,</b></p> <p>Mailing Address 2 GAELSONG LN</p> <p>City READING State PA Zip Code 19610-3120</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼<br/>565.00</p>   |  |  | <p>Date of Receipt<br/> <b>05 / 03 / 2021</b><br/> <b>Transaction ID : AB99E30B0881B46E081F</b> </p> <p>Amount of Each Receipt this Period<br/>17.50</p> <p><input checked="" type="checkbox"/> Memo Item</p>  |  |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional).....▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  | 0.00                                                                                                                                                                                                           |  |
| <p><b>TOTAL</b> This Period (last page this line number only).....▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |                                                                                                                                                                                                                |  |

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

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

FOR LINE NUMBER: PAGE 35 OF 426  
(check only one)

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

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |                                                                                                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. BENGTON, BRUCE, P., ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 2 GAELSONG LN<br>City READING State PA Zip Code 19610-3120<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 565.00       |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 03 / 2021<br><b>Transaction ID : A6613C94EE3EA4E3594C</b><br>Amount of Each Receipt this Period 17.50<br><input checked="" type="checkbox"/> Memo Item |
| <b>B. BENGTON, BRUCE, P., ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 2 GAELSONG LN<br>City READING State PA Zip Code 19610-3120<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 582.50       |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 11 / 2021<br><b>Transaction ID : A078756ACED3C473CB9E</b><br>Amount of Each Receipt this Period 17.50<br><input checked="" type="checkbox"/> Memo Item |
| <b>C. BAHLER, WALTER, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 5927 S CREEKSIDE CT<br>City REMINGTON State IN Zip Code 47977-8867<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 257.50 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 11 / 2021<br><b>Transaction ID : AAED1001CC8D48DFB16</b><br>Amount of Each Receipt this Period 25.00<br><input checked="" type="checkbox"/> Memo Item  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  | 0.00                                                                                                                                                                                                    |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |                                                                                                                                                                                                         |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

NEW PAC

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

A. BATTLE, DEBBIE, , ,

Mailing Address 2 BRENNAN CT

City  
AMARILLOState  
TXZip Code  
79121-1058FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : A10F5C803FFAE40FDA8F

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

B. BENGTON, BRUCE, P., ,

Mailing Address 2 GAELSONG LN

City  
READINGState  
PAZip Code  
19610-3120FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A76619EDAF6B9440CB67

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

C. BAHLER, WALTER, , ,

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTONState  
INZip Code  
47977-8867FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : AAB45E5F6F9B24F3B8F9

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 37 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16            | <input type="checkbox"/> 17 |                             |

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

NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BATTLE, DEBBIE, , ,**

Mailing Address 2 BRENNAN CT

City  
AMARILLO

State  
TX

Zip Code  
79121-1058

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : ABECCF34D5C104E15AC5

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

**B. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : AF28B1787C04F4DD7B58

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

**C. BARRO, LINO, R., ,**

Mailing Address 15006 ROCKFOLD DR

City  
HACIENDA HEIGHTS

State  
CA

Zip Code  
91745-4012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A49ACF1D2348B4C4E820

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BARRO, LINO, R, ,**

Mailing Address 15006 ROCKFOLD DR

City  
HACIENDA HEIGHTSState  
CAZip Code  
91745-4012FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : A693BF2F1FC114FD69AC

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. BARRO, LINO, R, ,**

Mailing Address 15006 ROCKFOLD DR

City  
HACIENDA HEIGHTSState  
CAZip Code  
91745-4012FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : A6171D8F487234826A91

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**C. BARRO, LINO, R, ,**

Mailing Address 15006 ROCKFOLD DR

City  
HACIENDA HEIGHTSState  
CAZip Code  
91745-4012FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AC446A293C33F46AEAE0

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

0.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BARRO, LINO, R, ,**

Mailing Address 15006 ROCKFOLD DR

City  
HACIENDA HEIGHTSState  
CAZip Code  
91745-4012FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

**Transaction ID : AF866BEDA50E9433E954**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. BAHLER, WALTER, , ,**

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTONState  
INZip Code  
47977-8867FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

**Transaction ID : ABA63242702994C2EB05**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

**C. BAHLER, WALTER, , ,**

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTONState  
INZip Code  
47977-8867FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

**Transaction ID : A9438C663AFB84C31BF2**

Amount of Each Receipt this Period

7.50

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. BARNUM, ROBERT, ROBERT, ,

Mailing Address PO BOX 1365

City  
EUREKAState  
CAZip Code  
95502-1365FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A3ECE8B243A0540989DF

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A9AD8C902022E4BF88A2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

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

C. DITRA, JOHN, ANTHONY, ,

Mailing Address 260 TRAMINER CT

City  
FREMONTState  
CAZip Code  
94539-6085FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DUTRS ENTERPRISESOccupation (for Individual)  
BOARD CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A5C0BC31659DF460AB11

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

1000.00



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

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

FOR LINE NUMBER: PAGE 41 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. DITRA, JOHN, ANTHONY, ,**

Mailing Address 260 TRAMINER CT

City  
FREMONT

State  
CA

Zip Code  
94539-6085

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DUTRS ENTERPRISES

Occupation (for Individual)  
BOARD CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A2BE248990A01401F97C**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. ELLIOTT, CARLETON, , ,**

Mailing Address 2060 CONTINENTAL AVE

City  
COSTA MESA

State  
CA

Zip Code  
92627-4128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : A822DEEB004E94A3D96A**

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

**C. DYKSTRA, GERTRUDE, , ,**

Mailing Address 7199 AVENUE 176

City  
TULARE

State  
CA

Zip Code  
93274-9405

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DYKSTRA DAIRY

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : A039E714630B34A5B886**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 42 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. EVANS, JOHN, P, ,**

Mailing Address PO BOX 458

City  
INDIANOLA

State  
WA

Zip Code  
98342-0458

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 26 / 2021

**Transaction ID : A143B9EA0A5394EC391D**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**B. EDGEComb, GINA, , ,**

Mailing Address 7648 PEPPERTREE RD

City  
DUBLIN

State  
CA

Zip Code  
94568-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : A2EBA3763B4124B3794F**

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

**C. EDGEComb, GINA, , ,**

Mailing Address 7648 PEPPERTREE RD

City  
DUBLIN

State  
CA

Zip Code  
94568-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : A1802A727C7194CEFAA9**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. EDGEComb, GINA, , ,

Mailing Address 7648 PEPPERTREE RD

City  
DUBLINState  
CAZip Code  
94568-2244FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : A698BCDEBA29140E6955

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

B. EDGEComb, GINA, , ,

Mailing Address 7648 PEPPERTREE RD

City  
DUBLINState  
CAZip Code  
94568-2244FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : A58005A64DADB4212921

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

C. ESTERLE, ELAINE, , ,

Mailing Address 6231 SHAGBARK DR

City  
LOVELANDState  
OHZip Code  
45140-8421FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : AC9778ABB811940CAB40

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 44 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. ESTERLE, ELAINE, , ,**

Mailing Address 6231 SHAGBARK DR

City  
LOVELAND

State  
OH

Zip Code  
45140-8421

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : ADA18B0B41DD746378B0**

Amount of Each Receipt this Period

5.00

☒ Memo Item

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

**B. ESTERLE, ELAINE, , ,**

Mailing Address 6231 SHAGBARK DR

City  
LOVELAND

State  
OH

Zip Code  
45140-8421

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : A9FEA6234A9C14D87871**

Amount of Each Receipt this Period

5.00

☒ Memo Item

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

**C. ELLENBERG, KENNETH, , ,**

Mailing Address 5656 N CENTRAL EXPY  
UNIT 200

City  
DALLAS

State  
TX

Zip Code  
75206-0948

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : A82302CA4F1DA4E8580D**

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. ELLISON, PAUL, , ,

Mailing Address 407 COUNTRY CLUB RD

City  
SALINAState  
KSZip Code  
67401-3508FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A97DC592D7093466CBE0

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

B. ELLISON, PAUL, , ,

Mailing Address 407 COUNTRY CLUB RD

City  
SALINAState  
KSZip Code  
67401-3508FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A946D9A901017431A8A5

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

C. ELLISON, PAUL, , ,

Mailing Address 407 COUNTRY CLUB RD

City  
SALINAState  
KSZip Code  
67401-3508FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AE6BC0C64FF8A41E59B3

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 OF 426  
(check only one)

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NELSON, WILLIAM, E., ,**

Mailing Address 3320 W TULARE AVE

City  
VISALIA

State  
CA

Zip Code  
93277-1861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A49DE3A3BF2E54E8B804**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

Mailing Address 3320 W TULARE AVE

City  
VISALIA

State  
CA

Zip Code  
93277-1861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A1D05CD79F7FF4825B5F**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

Mailing Address 7648 PEPPTREE RD

City  
DUBLIN

State  
CA

Zip Code  
94568-2244

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : ACAF88A8D646A45319B6**

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 47 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. EDGEComb, GINA, , ,**

Mailing Address 7648 PEPPERTREE RD

City  
DUBLIN

State  
CA

Zip Code  
94568-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

**Transaction ID : A40DF793905D84B1FB72**

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

**B. EDGEComb, GINA, , ,**

Mailing Address 7648 PEPPERTREE RD

City  
DUBLIN

State  
CA

Zip Code  
94568-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

**Transaction ID : A0934536F1F944805B10**

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

**C. EDGEComb, GINA, , ,**

Mailing Address 7648 PEPPERTREE RD

City  
DUBLIN

State  
CA

Zip Code  
94568-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

**Transaction ID : AB2A9C6DFC6154E3B81A**

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. EDGEComb, GINA, , ,

Mailing Address 7648 PEPPERTREE RD

City  
DUBLINState  
CAZip Code  
94568-2244FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : A236B807883CA4D62876

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : AFBBC9E22A0204D4CB58

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

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

C. FOWLER, RANDALL, , ,

Mailing Address 507 PRINCE ALBERT ST SE

City  
KENTWOODState  
MIZip Code  
49548-7648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
MAIL HANDLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 01    | 2021        |

Transaction ID : A5C8EC87214A4435E8D1

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

1000.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. EYHERABIDE, JUANITA, , ,

Mailing Address 5284 KENT DR

City  
BAKERSFIELDState  
CAZip Code  
93306-3908FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A522BFA50AE914289946

Amount of Each Receipt this Period

112.50

☒ Memo Item

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

B. FRAHM, DONALD, R, ,

Mailing Address 7 AVENUE DE LA MER  
APT 1006City  
PALM COASTState  
FLZip Code  
32137-1208FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A26F19E48C76A4CB3A75

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

C. GORES, MARJORIE, L, ,

Mailing Address 5800 SAINT CROIX AVE N  
APT C209City  
MINNEAPOLISState  
MNZip Code  
55422-4684FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A38F6E3AEFCA74E39B8A

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. GLERUP, GEORGE, E, MR., SR,

Mailing Address PO BOX 340

City  
VALEState  
ORZip Code  
97918-0340FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AE937EC999E914921A04

Amount of Each Receipt this Period

200.00

☒ Memo Item

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

B. GAILEY, CARLTON, , ,

Mailing Address 1633 MORTON MARATHON RD

City  
MORTONState  
MSZip Code  
39117-8772FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AAF4DBA7DC4DC4C418E5

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

C. FICHT, THOMAS, A, ,

Mailing Address 10238 BIG CANOE

City  
BIG CANOEState  
GAZip Code  
30143-5120FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A6F985A475F10427CAD6

Amount of Each Receipt this Period

300.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 51 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. GIACOMAZZI, ELSIE, M, ,**

Mailing Address 899 VISTA DEL ROBLE PL

# P1

City  
SAN JOSE

State  
CA

Zip Code  
95120-1641

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : AA1C711855C8C42ED841**

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

**B. GROWNEY, THOMAS, F, ,**

Mailing Address 11100 LAGRIMA DE ORO RD NE

APT 9412

City  
ALBUQUERQUE

State  
NM

Zip Code  
87111-6020

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TOM GROWNEY EQUIPMENT, INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : A152EEDEF9C6948C7B5A**

Amount of Each Receipt this Period

150.00

☒ Memo Item

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

**C. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.04

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : AFBADB0C9A52E43578CC**

Amount of Each Receipt this Period

5.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 52 OF 426  
(check only one)

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

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |                                                                                                                                                                                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. GINA, ALEXANDRA, J, ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 865 MIDLAND BLVD<br>City UNION State NJ Zip Code 07083-7427<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.04             |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2021<br><b>Transaction ID : A430CE3CCC8A94169B91</b><br>Amount of Each Receipt this Period 7.50<br><input checked="" type="checkbox"/> Memo Item  |
| <b>B. FRIDRICH, HEINZ, K, ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 131 LONG POINT DR<br>City FERNANDINA BEACH State FL Zip Code 32034-6410<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 912.50 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2021<br><b>Transaction ID : ABB8F4C6F3CCE49AD858</b><br>Amount of Each Receipt this Period 20.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>C. FRIDRICH, HEINZ, K, ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 131 LONG POINT DR<br>City FERNANDINA BEACH State FL Zip Code 32034-6410<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 912.50 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2021<br><b>Transaction ID : AAC194E5B88A44E2FBB2</b><br>Amount of Each Receipt this Period 20.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  | 0.00                                                                                                                                                                                                      |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |                                                                                                                                                                                                           |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. HARVEY, WILLIAM, T, ,

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A3969BA4A72B74F548FF

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

B. GREEN, WILLIAM, ROBERT, , MD

Mailing Address 2408 SKYLINE PT

City  
JONESBOROState  
ARZip Code  
72404-8079FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : AD550CE96DE4C4F3687E

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

C. HARTMAN, JUDITH, , ,

Mailing Address 5132 DELACROIX DR

City  
BROOKSVILLEState  
FLZip Code  
34604-9106FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A389E9B5224974092A1F

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C

C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |

Transaction ID : ACEA7B82FBCE04789AF9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

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

**B. HOUSE, ELIZABETH, M, ,**

Mailing Address 14317 VINT HILL RD

City  
NOKESVILLEState  
VAZip Code  
20181-1221FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 1 |

Transaction ID : A23791FF36AC24C428F9

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. HENDERSON, ALLAN, P, ,**

Mailing Address 11802 BUFFINGTON ST

City  
BAKERSFIELDState  
CAZip Code  
93312-4685FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 1 |

Transaction ID : A84689E31D0A44AA59BF

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

1000.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. HEARST, SUSAN, R., ,

Mailing Address 4650 OLD MILLSAP RD

City  
MILLSAPState  
TXZip Code  
76066-2545FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y | Y | Y |
| 0 | 5 |  | 2 | 0 |  | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AE17CC0892F5C4E2BA76

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

B. HELM, GLORA, B., ,

Mailing Address 2917 FERNDAL ST

City  
HOUSTONState  
TXZip Code  
77098-1117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REQUESTEDOccupation (for Individual)  
INFO REQUESTED - BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y | Y | Y |
| 0 | 5 |  | 1 | 3 |  | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A8E217EDE71E6401FB65

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

C. HOOK, JOANNE, H., ,

Mailing Address 4141 S BRAESWOOD BLVD  
APT 1142City  
HOUSTONState  
TXZip Code  
77025-3347FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y | Y | Y |
| 0 | 5 |  | 2 | 6 |  | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A652F6898158545B0891

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 56 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. HOOK, DAN, , ,**

Mailing Address PO BOX 968

City  
LEVELLAND

State  
TX

Zip Code  
79336-0968

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HOCKLEY COUNTY ABSTRACT

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : AE4EF22DA856A4480B9D**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**B. HEIKKALA, MARLA, , ,**

Mailing Address 10311 SE EVERGREEN HWY

City  
VANCOUVER

State  
WA

Zip Code  
98664-5359

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DGI COMMERCIAL CONST.

Occupation (for Individual)  
SENIOR HOUSING DEVELOPMENT M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : A928BA50F300B4890B6C**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**C. HEIKKALA, WAYNE, E, ,**

Mailing Address 10311 SE EVERGREEN HWY

City  
VANCOUVER

State  
WA

Zip Code  
98664-5359

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DGI COMMERCIAL CONST.

Occupation (for Individual)  
SENIOR HOUSING DEVELOPMENT M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : A1F87D03CEA6849FE9D7**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. HERRINGTON, JOHN, S, ,

Mailing Address 614 JOHNS PL

City  
BENICIAState  
CAZip Code  
94510-3048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
BUSINESS ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 27  | 2021    |

Transaction ID : AE21BC75537D445FFA72

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : AA12A5780DB934E749FE

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

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

C. CARTER, KARLA, , ,

Mailing Address 203 SOMERTON DR

City  
HUNTSVILLEState  
ALZip Code  
35811-7129FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 09  | 2021    |

Transaction ID : A746E588C89BC4C798F1

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

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

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. READ, JUDY, , ,

Mailing Address 285 READ RD

City  
FARMERVILLEState  
LAZip Code  
71241-7937FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
READ LUMBER AND SUPPLY, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 0 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AF47D88220C0C4630824

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

B. STEELESMTIH, JOHN, , MR.,

Mailing Address 89 MEADOWBROOK COUNTRY CLUB EST

City  
BALLWINState  
MOZip Code  
63011-1601FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 0 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A1D5B125A8C574809A76

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

C. SCHULTZ, HAROLD, M, ,

Mailing Address 1125 LAWRENCE CT

City  
EL CERRITOState  
CAZip Code  
94530-2411FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 0 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A78523D4AFF6B4A5688C

Amount of Each Receipt this Period

105.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 59 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. STAMBACH, BUD, , ,**

Mailing Address 703 W HERBERT AVE  
# 115

City  
REEDLEY

State  
CA

Zip Code  
93654-3941

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
06 / 10 / 2021

Transaction ID : A3A096E01DA3F47579E8

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

**B. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City

ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.50

Date of Receipt

MM / DD / YYYY  
06 / 09 / 2021

Transaction ID : A3DD0D8A1088A4B49BE3

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**C. STESLICKI, LINDA, , ,**

Mailing Address PO BOX 743

City

HELENDAL

State  
CA

Zip Code  
92342-0743

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
06 / 10 / 2021

Transaction ID : A36333A71B77F42588B0

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 60 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. STIEVEN, JOSEPH, , ,**

Mailing Address 2 TRINITY FARM LN

City  
SAINT LOUIS

State  
MO

Zip Code  
63124-1037

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STIEVEN CAPITAL ADVISORS

Occupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
06 / 10 / 2021

Transaction ID : AFF9CDD260F0B4E2CAD6

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

**B. PETERSON, DONALD, , ,**

Mailing Address 17300 N 88TH AVE  
APT 154

City  
PEORIA

State  
AZ

Zip Code  
85382-4794

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY  
06 / 10 / 2021

Transaction ID : A732A77FBDEB84B31B9C

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

MM / DD / YYYY  
06 / 02 / 2021

Transaction ID : A13B4BDDD6CDB44059E1

Amount of Each Receipt this Period

725.00

☐ Memo Item  
TRANSFER FROM JFC

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

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

725.00

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

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

FOR LINE NUMBER: PAGE 61 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. SUTTON, DELMAR, , ,**

Mailing Address PO BOX 33074

City  
KANSAS CITY

State  
MO

Zip Code  
64114-0074

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NONE - RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2021

**Transaction ID : AF6643511F3E449CCB50**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**B. TAYLOR, TOMMYE, J, ,**

Mailing Address 7446 E CACTUS WREN RD

City  
SCOTTSDALE

State  
AZ

Zip Code  
85250-4603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2021

**Transaction ID : A5F213BAF6F7A4088839**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : AEDF03A9D0A22458BBF5**

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

Transaction ID : A8051ECC48E2B42059FF

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

B. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

Transaction ID : A45F0EC1FB8D54ED989C

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

C. TERUYA, WESLEY, K, ,

Mailing Address 94-404 HOKUAHIAHI ST

City  
MILILANIState  
HIZip Code  
96789-1937FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

Transaction ID : AFBED3FB2141442498A

Amount of Each Receipt this Period

- 2900.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. TERUYA, WESLEY, K, ,

Mailing Address 94-404 HOKUAHIAHI ST

City  
MILILANIState  
HIZip Code  
96789-1937FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 03    | / | 2021        |

Transaction ID : A5B397019D00B40729CE

Amount of Each Receipt this Period

2900.00

☒ Memo Item

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

B. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3875.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 11    | / | 2021        |

Transaction ID : A5F9B0FC883704BB688F

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

C. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3875.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 11    | / | 2021        |

Transaction ID : A9F356CEC8FED4887B04

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 64 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

**Transaction ID : A41C0A431A1724C83A1B**

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

**Transaction ID : AE3F3C255D3CF4427B53**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

**Transaction ID : ABABFAB20E19F4D8891B**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00



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

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

FOR LINE NUMBER: PAGE 65 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A2BB57E342CDD47A78FB

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : AF2C7F0DAC1FD4DD88B2

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : AA4DEC251522843FA80D

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 66 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

MM / DD / YYYY  
05 / 18 / 2021

Transaction ID : AA10EC1AA906549DB83B

Amount of Each Receipt this Period

75.00

☒ Memo Item

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

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

MM / DD / YYYY  
05 / 18 / 2021

Transaction ID : A42E0789CBAFA4B688F5

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

MM / DD / YYYY  
05 / 18 / 2021

Transaction ID : ABAF0042F1AA44ABCAE1

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4450.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A2A18F7BDDD2B424A8A2

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

B. TIERNEY, MATTHEW, , ,

Mailing Address 401 RED CEDAR CT

City  
NASHVILLEState  
TNZip Code  
37214-4023FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AC6B05E233B2747C789C

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

C. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AEE3D6823ED02481093B

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City

SOUTHFIELD

State

MI

Zip Code

48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 25    |   | 2021        |

Transaction ID : A582177EC9AB642FFBC4

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City

SOUTHFIELD

State

MI

Zip Code

48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 25    |   | 2021        |

Transaction ID : A91C71DB9C24E4483BDB

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City

SOUTHFIELD

State

MI

Zip Code

48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 25    |   | 2021        |

Transaction ID : A2959AEEFB EA94318AAD

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 69 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A7E32818677A4452D92F

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : AF723CD38AA3E4E4A9A5

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : AA1383D5DBD5F403F89C

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 OF 426  
(check only one)

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

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

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

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A6D3B46657FDD4149AC9

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : AFB9A26765650492188F

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A43F30F3941F04133B19

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AB299B6C9DE134CAD8A8

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

B. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : ACCEFFDB652C6A4A4EA16

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

C. TORLUCCI, MARGARET, A, MS.,

Mailing Address 13 CHAMBORD CT

City  
MANCHESTERState  
NJZip Code  
08759-6153FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 26    | 2021        |

Transaction ID : A0F54B7453D864190801

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A0EB7BA23A7AF4B418E1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

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

**B. SELLORS, BENJAMIN, , ,**

Mailing Address 7310 CLEAR SPRINGS LN

City  
MARSHALLState  
VAZip Code  
20115-2115FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : AB5C5F533E237444DA2D

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. SERIO, PATRICIA, A, ,**

Mailing Address 20134 E DAMERAL DR

City  
COVINAState  
CAZip Code  
91724-3937FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A5BBFAC7A89AE4250B71

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

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

1000.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. SKASKIW, DOROTHY, , ,

Mailing Address 32433 WILLOW PARKE CIR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-7039FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 13    | / | 2021        |

Transaction ID : A8660D7801D40414F9D8

Amount of Each Receipt this Period

75.00

☒ Memo Item

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

B. SERIO, PATRICIA, A, ,

Mailing Address 20134 E DAMERAL DR

City  
COVINAState  
CAZip Code  
91724-3937FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 25    | / | 2021        |

Transaction ID : A575C83033C094904809

Amount of Each Receipt this Period

27.50

☒ Memo Item

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

C. SERIO, PATRICIA, A, ,

Mailing Address 20134 E DAMERAL DR

City  
COVINAState  
CAZip Code  
91724-3937FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 25    | / | 2021        |

Transaction ID : A191D88951BE045CCA7D

Amount of Each Receipt this Period

27.50

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. VAN SCYOC, CHERYL, ANN, ,

Mailing Address PO BOX 576

City  
PIXLEYState  
CAZip Code  
93256-0576FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PIXLEY AUTO PARTSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : AFD28367B3F82433CBDD

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

B. SIMVOULAKIS, GEORGE, , ,

Mailing Address 3620 VIADER DR

City  
MODESTOState  
CAZip Code  
95356-0329FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEORGE SIMVOULAKIS CONSTRUCTIONOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A697C1149DF8B473C8EC

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

C. SHAEFFER, GARY, R, ,

Mailing Address 2281 SERENA AVE

City  
CLOVISState  
CAZip Code  
93619-2834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SHAETTER RANCH, LLCOccupation (for Individual)  
RETIRED AG. BANKER/ FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 26    | 2021        |

Transaction ID : A84D377F41CB24604AD8

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 75 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. SHAFFER, THERESA, , ,**

Mailing Address 3098 SONRISA DR

City  
CORONAState  
CAZip Code  
92881-3918FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 13    | / | 2021        |

**Transaction ID : A3950F83088BA47FEA43**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**B. SIMPERMAN, ROY, F, ,**

Mailing Address 5609 80TH AVE SE

City  
MERCER ISLANDState  
WAZip Code  
98040-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 27    | / | 2021        |

**Transaction ID : AF35D1F453E92449E9A3**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**C. SIMPERMAN, ROY, F, ,**

Mailing Address 5609 80TH AVE SE

City  
MERCER ISLANDState  
WAZip Code  
98040-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 13    | / | 2021        |

**Transaction ID : A0BA677AAD45845C7A86**

Amount of Each Receipt this Period

250.00

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

0.00

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

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

FOR LINE NUMBER: PAGE 76 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. SLEPIAN, LINDA, J, ,**

Mailing Address 328 SCOTTSDALE DR

City  
TROY

State  
MI

Zip Code  
48084-1721

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.50

Date of Receipt

**05 / 03 / 2021**

**Transaction ID : ABD941E5029794F848E1**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. SLEPIAN, LINDA, J, ,**

Mailing Address 328 SCOTTSDALE DR

City  
TROY

State  
MI

Zip Code  
48084-1721

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.50

Date of Receipt

**05 / 03 / 2021**

**Transaction ID : A9B1D53E61B1A434EBF8**

Amount of Each Receipt this Period

40.00

☒ Memo Item

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

**C. SMITH, BRUCE, , ,**

Mailing Address 2987 SEE CANYON RD

City

SAN LUIS OBISPO

State  
CA

Zip Code  
93405-8015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A759FE71B32FF475CAB5**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 77 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. SLAVIK, JOHN, H, ,**

Mailing Address 510 E ALEXANDER PALM RD

City  
BOCA RATON

State  
FL

Zip Code  
33432-7985

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

Transaction ID : A020AAAF4E4645569EF

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**B. SLEPIAN, LINDA, J, ,**

Mailing Address 328 SCOTTSDALE DR

City  
TROY

State  
MI

Zip Code  
48084-1721

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

942.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

Transaction ID : A9CA03EC804954544AA9

Amount of Each Receipt this Period

40.00

☒ Memo Item

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

**C. SMITH, BRUCE, , ,**

Mailing Address 2987 SEE CANYON RD

City  
SAN LUIS OBISPO

State  
CA

Zip Code  
93405-8015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A546D88D74D8D4F62B94

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. SMITH, BRUCE, , ,**

Mailing Address 2987 SEE CANYON RD

City  
SAN LUIS OBISPOState  
CAZip Code  
93405-8015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A7FA9744E542948C987C

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**B. SLEPIAN, LINDA, J, ,**

Mailing Address 328 SCOTTSDALE DR

City  
TROYState  
MIZip Code  
48084-1721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : ACECEFFB036994F849A2

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. SLAVIK, JOHN, H, ,**

Mailing Address 510 E ALEXANDER PALM RD

City  
BOCA RATONState  
FLZip Code  
33432-7985FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : A7750909E07724AD4A46

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 79 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. SHARP, VICTOR, , , JR**

Mailing Address 30 SPYGLASS CIR

City  
PALOS HEIGHTS

State  
IL

Zip Code  
60463-3117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
QUALITY SHARP FOODS

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : A07F1304499A145DC898**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**B. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : A0EC9FB60F1D4486598B**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
TRANSFER FROM JFC

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

**C. MOORE, MARY, L, ,**

Mailing Address PO BOX 269

City  
SALUDA

State  
VA

Zip Code  
23149-0269

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : AC20BE88972A54E6CAF8**

Amount of Each Receipt this Period

187.50

☒ Memo Item

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

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

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. MILLS, BRUCE, , ,

Mailing Address 2650 S HANLEY RD  
STE 200

City  
SAINT LOUIS

State  
MO

Zip Code  
63144-2559

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MILLS PROPERTIES

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2021

Transaction ID : AAB82B98709C94E2A93D

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

B. MEIER, CRAIG, A, ,

Mailing Address 6257 STEFANI DR

City  
DALLAS

State  
TX

Zip Code  
75225-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RESOURCE ASSOC. FIN.

Occupation (for Individual)  
CONSULT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 27 / 2021

Transaction ID : AF19A21E7F2C54ABA92B

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

C. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2021

Transaction ID : A300E2CA252FC4E04945

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00



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

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

FOR LINE NUMBER: PAGE 81 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : AA0BA28E801544CDCA03**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. MIKITAW, FRANK, , ,**

Mailing Address 7714 E PARKSIDE DR

City  
YOUNGSTOWN

State  
OH

Zip Code  
44512-5310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

**Transaction ID : AF523088BA7124AB39BD**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**C. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

**Transaction ID : A16CB5B8EF2784D4FBB3**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 82 OF 426

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 11 / 2021

Transaction ID : A97259B3D5C164A0DAC6

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A6E0D8F185D934945BE0

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**C. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A399D79C954BD4AA8B95

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 83 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 18 / 2021

Transaction ID : A843C50FB10554CCAAC6

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 18 / 2021

Transaction ID : A6C00DA594D1A4D5B9AB

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**C. MOORE, BETTY, , ,**

Mailing Address 5823 INDIAN TRL

City  
HOUSTON

State  
TX

Zip Code  
77057-1306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

05 / 18 / 2021

Transaction ID : A1CF619EDFE3C4D8697B

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. MOORE, BETTY, , ,

Mailing Address 5823 INDIAN TRL

City  
HOUSTONState  
TXZip Code  
77057-1306FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : AC1A8D186C8D54C13867

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

B. MOORE, BETTY, , ,

Mailing Address 5823 INDIAN TRL

City  
HOUSTONState  
TXZip Code  
77057-1306FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : A7AFB5AFCECD749AB849

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

C. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALEState  
AZZip Code  
86324-0018FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : ABC8CF64276194A3A9D2

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 OF 426  
(check only one)

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

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A46E9ACD7B3A6420D9BA

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

B. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A104669A99F8B4D3AA9A

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

C. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A7F77181563A94DE9BDB

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 86 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

05 / 25 / 2021

Transaction ID : A0041B19EF0DF4354AB7

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

05 / 25 / 2021

Transaction ID : A003E2B48E57340C2925

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**C. MJOLSNESS, SALLY, A, ,**

Mailing Address 748 TUSCANY WAY

City  
EDMOND

State  
OK

Zip Code  
73034-6786

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.50

Date of Receipt

05 / 25 / 2021

Transaction ID : AA8F1DB2CF94F4C5C9D2

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 87 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. MJOLSNESS, SALLY, A, ,**

Mailing Address 748 TUSCANY WAY

City  
EDMOND

State  
OK

Zip Code  
73034-6786

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.50

Date of Receipt

MM / DD / YYYY  
05 / 25 / 2021

Transaction ID : A40915B84AAA74FFB9E0

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. MILLS, DONALD, RAY, ,**

Mailing Address 13969 6TH AVE

City  
HANFORD

State  
CA

Zip Code  
93230-8701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
05 / 26 / 2021

Transaction ID : A44D8E9C753554FFB92A

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

**C. MILLER, JOSEPH, , ,**

Mailing Address 3400 HOLLY HILL RD

City  
LAKE CHARLES

State  
LA

Zip Code  
70605-1319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
05 / 13 / 2021

Transaction ID : AA44EE079FBDE4137BE6

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. MILLER, PAUL, , , II**

Mailing Address 1202 SOUTHWAYS

City  
DELRAY BEACHState  
FLZip Code  
33483-7218FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A768B3FAC92CA4B2A846

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**B. MILLER, FRED, B, ,**Mailing Address 12800 NE SALMON CREEK AVE  
UNIT 107City  
VANCOUVERState  
WAZip Code  
98686-3024FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : AABAB638E036D4DC497E

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**C. MONTGOMERY, BETTY, , ,**

Mailing Address 4160 WASHBURN ST

City  
DECATURState  
ILZip Code  
62521-1757FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A3EBD960D6E1D45A983B

Amount of Each Receipt this Period

75.00

☒ Memo Item

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

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

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A92C4EF9D3B8F4CF5BB0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

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

**B. DE BLASI, RICHARD, J, ,**

Mailing Address 11574 KELSEY ST

City

STUDIO CITY

State  
CAZip Code  
91604-3022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAL-STATE AUTO PARTS, INC.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 06  | 2021    |

Transaction ID : A8FE0BE36E6314532A8E

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**C. SCHNEREGGER, RICHARD, , ,**

Mailing Address 15145 W WOODRIDGE DR

City

SURPRISE

State  
AZZip Code  
85374-8550FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
US ARMY RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 05  | 2021    |

Transaction ID : AD3CE6E4C8CE84C8885E

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

NEW PAC

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

A. DECHANCE, RICHARD, , ,

Mailing Address 817 REGAL MANOR WAY

City  
SUN CITY CENTERState  
FLZip Code  
33573-6583FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 05  | 2021        |

Transaction ID : A209F9C4C88A241E0A90

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

B. STORY, JOHN, L, ,

Mailing Address 179 CASTLE CREST RD

City  
ALAMOState  
CAZip Code  
94507-2679FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 06  | 2021        |

Transaction ID : AF96972B428CC4F2A99B

Amount of Each Receipt this Period

100.00

☒ Memo Item

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

C. CONLEY, MARK, , ,

Mailing Address 4312 N BAYWOOD DR

City  
HERNANDOState  
FLZip Code  
34442-6526FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 08  | 2021        |

Transaction ID : ABD0792A7A4D24F338CA

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).....▶

0.00

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

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

FOR LINE NUMBER: PAGE 91 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. SCHMALZRIEDT, GARY, , ,**

Mailing Address 3708 LLYN GLASLYN PL

City  
SANTA ROSA

State  
CA

Zip Code  
95403-0949

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
06 / 09 / 2021

Transaction ID : A96D76D0FC6FD49E9A35

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**B. POWELL-MILLAR, CHRISTINE, , REV.,**

Mailing Address 912 VESSONA CIR

City  
FOLSOM

State  
CA

Zip Code  
95630-8725

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
06 / 06 / 2021

Transaction ID : A7376BFF4ABE4334B7E

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**C. WATSON, JAMES, R, ,**

Mailing Address 9 TOMOKA COVE WAY

City  
ORMOND BEACH

State  
FL

Zip Code  
32174-1802

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY  
06 / 06 / 2021

Transaction ID : AC792251781B04958AC8

Amount of Each Receipt this Period

150.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

NEW PAC

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

A. GOOCH, SHARON, L, ,

Mailing Address PO BOX 722

City  
SUN CITYState  
CAZip Code  
92586-0722FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 07  | 2021    |

Transaction ID : A84AD5AEE9E7D473AB94

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

B. GREEN, WILLIAM, ROBERT, , MD

Mailing Address 2408 SKYLINE PT

City  
JONESBOROState  
ARZip Code  
72404-8079FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1262.50

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 06  | 2021    |

Transaction ID : AD985C68823F9451B843

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

C. TIESIERA, WILL, L, ,

Mailing Address 2101 E CROSS AVE

City  
TULAREState  
CAZip Code  
93274-2457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD DEALERSHIPOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 06  | 2021    |

Transaction ID : ACA1F5B2D816D449FA23

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. BISHAI, EILEEN, , ,

Mailing Address 105 LAKE SHORE RD

City  
GROSSE POINTE FARMSState  
MIZip Code  
48236-3761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 05  | 2021        |

Transaction ID : A0FC8CB0FFAB74F57B07

Amount of Each Receipt this Period

150.00

☒ Memo Item

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

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 02  | 2021        |

Transaction ID : A651BB6D2CFC84ED793A

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 TRANSFER FROM JFC

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

C. BRADY, LINDA, , ,

Mailing Address 4009 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0878FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

Transaction ID : A759E649D04834E6089C

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 94 OF 426  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BRADY, LINDA, , ,**

Mailing Address 4009 109TH ST

City  
LUBBOCK

State  
TX

Zip Code  
79423-0878

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A33BAF18C5AB64560920**

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

**B. BRADY, LINDA, , ,**

Mailing Address 4009 109TH ST

City  
LUBBOCK

State  
TX

Zip Code  
79423-0878

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A29D1501F84294731AED**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**C. BRADY, LINDA, , ,**

Mailing Address 4009 109TH ST

City  
LUBBOCK

State  
TX

Zip Code  
79423-0878

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AB71736EF44C7432A866**

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 95 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BRODIE, RENTON, , ,**

Mailing Address 17138 RIVER BLUFF DR

City  
UNION PIER

State  
MI

Zip Code  
49129-9478

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A8232698AEBDD48FCB33**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**B. BROOKS, BOB, R., ,**

Mailing Address 5 TALMONT PL

City  
LITTLE ROCK

State  
AR

Zip Code  
72223-9054

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CAPITOL COUNSEL, LLC

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A2F288F68B3DE4BD1976**

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

**C. CANTER, CAITLIN, , ,**

Mailing Address 3511 NIMITZ RD

City  
KENSINGTON

State  
MD

Zip Code  
20895-1715

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CAPITOL COUNSEL LLC

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A3A1872CF43A84780A35**

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)..... ►

0.00

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

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

FOR LINE NUMBER: PAGE 96 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AB436DC4C5980416AAC5

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

**B. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A94A9E780181244C7A93

Amount of Each Receipt this Period

- 1012.50

☒ Memo Item

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

**C. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A19982F6BB8C74B719D2

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00



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

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

FOR LINE NUMBER: PAGE 97 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16            | <input type="checkbox"/> 17 |                             |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A1E10D850A36F4FF8966**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**B. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A1FF707C071024B3FB0C**

Amount of Each Receipt this Period

- 1012.50

☒ Memo Item

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

**C. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A3319F3D763804ABC9EE**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 98 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A8609CA63358A4800A88

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

**B. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AADA2FE323D714832976

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A7E6D8D1032564E7EB1F

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 99 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A9295162BDC1F4680AF3

Amount of Each Receipt this Period

17.50

☒ Memo Item

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

**B. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A70096E1BA6264BC9BE6

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. BROOKS, JUSTINE, , ,**

Mailing Address 7 MILL BROOK DR

City  
TEMPLETON

State  
MA

Zip Code  
01468-1485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AE4AA8B3088E84842B05

Amount of Each Receipt this Period

1012.50

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

NEW PAC

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

A. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A8FC0CAE5DB3F4BCC8F3

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

B. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A7B74814FA1AB4925A55

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

C. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A939590536B344A90936

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AB197E7A0CE734B0EB58

Amount of Each Receipt this Period

20.00

☒ Memo Item

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

B. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.75

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AB72EACC820544F6ABBB

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

C. CABELA, RITA, , ,

Mailing Address 7562 CRESTVIEW DR

City  
NIWOTState  
COZip Code  
80504-7301FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A951AD0287AD24C42BA9

Amount of Each Receipt this Period

5.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 102 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

04 / 29 / 2021

Transaction ID : A3ED465AA24B84B7889C

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**B. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

04 / 29 / 2021

Transaction ID : ACF4CCE56E5BE44398A0

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

04 / 29 / 2021

Transaction ID : ACFFAFA78386D48D4BBB

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 103 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : A23242446C7934D409A1

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**B. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : A6477F4BD21F5497C9A2

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : AC32981D54F6B4F6B8C3

Amount of Each Receipt this Period

5.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 104 OF 426

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A15331E53B7254138872**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

**B. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AFD34303F2CB742878F8**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A0BE334D06EB94362A8B**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00



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

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

FOR LINE NUMBER: PAGE 105 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

04 / 29 / 2021

Transaction ID : A8DE37309BECB4D3AA8E

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

04 / 29 / 2021

Transaction ID : AC38C8FEFB20244DF950

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

04 / 29 / 2021

Transaction ID : ADFD518E51B2A4022843

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 106 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

**Transaction ID : A790DCEB0242247E5AD5**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**B. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

**Transaction ID : A5C497C72D92D4BBD828**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

**C. CABELA, RITA, , ,**

Mailing Address 7562 CRESTVIEW DR

City  
NIWOT

State  
CO

Zip Code  
80504-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

**Transaction ID : A8D64D114FE95481883E**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 107 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. BRIGGS, JOHN, M, ,

Mailing Address 435 WILLIAMS RD

City  
WYNNEWOODState  
PAZip Code  
19096-1632FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : AA5C8976DE2CC4FE68F1

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

B. BRIGGS, JOHN, M, ,

Mailing Address 435 WILLIAMS RD

City  
WYNNEWOODState  
PAZip Code  
19096-1632FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A9AE7674BC14A42CC996

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

C. BRIGGS, JOHN, M, ,

Mailing Address 435 WILLIAMS RD

City  
WYNNEWOODState  
PAZip Code  
19096-1632FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A741F10DC6D4845BA95F

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

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

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. BULLEN, JEFFREY, , ,

Mailing Address 7417 CARDILLO TRL

City  
YUCCA VALLEYState  
CAZip Code  
92284-2309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAIN ENGINEERING ASSOCIATESOccupation (for Individual)  
RESOURCE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

Transaction ID : A52ACD3F87A514A34848

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

B. CAMENTZ, ERNST, , ,

Mailing Address 8500 SOUTHWIND BAY CIR

City  
FORT MYERSState  
FLZip Code  
33908-6029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CREATION GARDENSOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

Transaction ID : A73A033172DB54006833

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 02  | 2021        |

Transaction ID : A134BB54315914957B72

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 TRANSFER FROM JFC

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 109 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. LEWIS, JEFFREY, B., ,**

Mailing Address 2464 BAYSHORE DR

City  
NEWPORT BEACH

State  
CA

Zip Code  
92663-5605

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A90E02A2114AD40548F0**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

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

**B. LEWIS, MARY, M., ,**

Mailing Address PO BOX 41908

City  
SANTA BARBARA

State  
CA

Zip Code  
93140-1908

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RBM, INC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AFE4FF280027A4670962**

Amount of Each Receipt this Period

750.00

☒ Memo Item

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

**C. LIVINGSTON, NOREEN, , ,**

Mailing Address 1071 N MANOR DR

City  
TULARE

State  
CA

Zip Code  
93274-2114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
LIVINGSTON DAIRY CONSULTING

Occupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AE442BAF9BAE444AB9C2**

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 110 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTON

State  
OR

Zip Code  
97838-2663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.50

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A4B50ACE1FEED4ABABF**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

**B. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTON

State  
OR

Zip Code  
97838-2663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.50

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A7C0A282BFEF84CDABFE**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTON

State  
OR

Zip Code  
97838-2663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.50

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A3D02CFEF147249D2B0D**

Amount of Each Receipt this Period

25.00

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 111 OF 426  
(check only one)

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

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |                                                                                                                                                                                                                        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. MALMBERG, LARRY, , ,</b></p> <p>Mailing Address <b>1000 S HIGHWAY 395</b></p> <p>City <b>HERMISTON</b> State <b>OR</b> Zip Code <b>97838-2663</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>222.50</b></p> |  |  | <p>Date of Receipt<br/> <b>04 / 29 / 2021</b><br/> <b>Transaction ID : A01131B2144084D88B9C</b> </p> <p>Amount of Each Receipt this Period<br/> <b>25.00</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. MALMBERG, LARRY, , ,</b></p> <p>Mailing Address <b>1000 S HIGHWAY 395</b></p> <p>City <b>HERMISTON</b> State <b>OR</b> Zip Code <b>97838-2663</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>222.50</b></p> |  |  | <p>Date of Receipt<br/> <b>04 / 29 / 2021</b><br/> <b>Transaction ID : AB0435046B1D143DCB3E</b> </p> <p>Amount of Each Receipt this Period<br/> <b>25.00</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. MALMBERG, LARRY, , ,</b></p> <p>Mailing Address <b>1000 S HIGHWAY 395</b></p> <p>City <b>HERMISTON</b> State <b>OR</b> Zip Code <b>97838-2663</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼ <b>222.50</b></p>   |  |  | <p>Date of Receipt<br/> <b>04 / 29 / 2021</b><br/> <b>Transaction ID : AC5A3C9786C824ECA9F8</b> </p> <p>Amount of Each Receipt this Period<br/> <b>10.00</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  | <p><b>0.00</b></p>                                                                                                                                                                                                     |  |
| <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |                                                                                                                                                                                                                        |  |

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

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

FOR LINE NUMBER: PAGE 112 OF 426  
(check only one)

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

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

|                                                                                                                                 |             |                                        |                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. MALMBERG, LARRY, , ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : AD3351065F5E9419A948</b> |  |
| Mailing Address 1000 S HIGHWAY 395                                                                                              |             |                                        | Amount of Each Receipt this Period<br>50.00                                                                |  |
| City<br>HERMISTON                                                                                                               | State<br>OR | Zip Code<br>97838-2663                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>222.50     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. MALMBERG, LARRY, , ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : AB15EAC647BD94B8CAFE</b> |  |
| Mailing Address 1000 S HIGHWAY 395                                                                                              |             |                                        | Amount of Each Receipt this Period<br>25.00                                                                |  |
| City<br>HERMISTON                                                                                                               | State<br>OR | Zip Code<br>97838-2663                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>222.50     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. MALMBERG, LARRY, , ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A12ADDE2BFD0D43F3AD8</b> |  |
| Mailing Address 1000 S HIGHWAY 395                                                                                              |             |                                        | Amount of Each Receipt this Period<br>12.50                                                                |  |
| City<br>HERMISTON                                                                                                               | State<br>OR | Zip Code<br>97838-2663                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>222.50     |                                                                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                            |  |



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16            | <input type="checkbox"/> 17 |                             |

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NAME OF COMMITTEE (In Full)

NEW PAC

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

A. MALMBERG, LARRY, , ,

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTONState  
ORZip Code  
97838-2663FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A7AFB37148045493DBB7

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

B. LINEBERRY, WALTER, C, ,

Mailing Address 13550 NORLAND ST

City  
SAN ANTONIOState  
TXZip Code  
78232-4917FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A3D1618120FCB4734B7B

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

C. LEE, YONG, , ,

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECTState  
ILZip Code  
60056-3655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HTRD, LTD.Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A4822008EB7C94B21848

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 114 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

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

**A. LEE, YONG, , ,**

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECT

State  
IL

Zip Code  
60056-3655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HTRD, LTD.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A0893F13B84CB403BB83**

Amount of Each Receipt this Period

10.00

☒ Memo Item

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

**B. LEE, YONG, , ,**

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECT

State  
IL

Zip Code  
60056-3655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HTRD, LTD.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : AD00257288BB1401D935**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

**C. LEE, YONG, , ,**

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECT

State  
IL

Zip Code  
60056-3655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HTRD, LTD.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A9AFD96AC88184DA4A6C**

Amount of Each Receipt this Period

12.50

☒ Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 115 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, YONG, , ,**

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECT

State  
IL

Zip Code  
60056-3655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HTRD, LTD.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A49BEEE1AE20940FEB9F**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, YONG, , ,**

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECT

State  
IL

Zip Code  
60056-3655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HTRD, LTD.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AA34DC62C1E2F4684BCB**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARKS, TOM, , ,**

Mailing Address 2700 RAINTREE PL

City  
MODESTO

State  
CA

Zip Code  
95355-4647

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
AG SEEDS UNLIMITED

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A29ABE408A3B649F39F9**

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)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : A6C687850988A4D26901**

Amount of Each Receipt this Period

1225.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. MAIORINO, MARJORIE, R, ,**

Mailing Address 8968 DAIRY LN

City  
DOS PALOS

State  
CA

Zip Code  
93620-9617

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 26 / 2021**

**Transaction ID : A739DD057C3884EDA99B**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. HUNDT, JANICE, , ,**

Mailing Address 1515 YORK RD

City  
LUTHERVILLE

State  
MD

Zip Code  
21093-5611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NORMANS

Occupation (for Individual)  
CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 26 / 2021**

**Transaction ID : A6580182F704843CCA63**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1225.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                        |                                                                                                              |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. CANZIANI, RICHARD, , ,</b>             |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 26 / 2021<br><b>Transaction ID : A86F06EDBC98A4FE6BDE</b> |  |
| Mailing Address 118 LAVENDER HILL LN                                                                                            |             |                                        | Amount of Each Receipt this Period<br>250.00                                                                 |  |
| City<br>LANDENBERG                                                                                                              | State<br>PA | Zip Code<br>19350-1390                 | <input checked="" type="checkbox"/> Memo Item                                                                |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                              |  |
| Name of Employer (for Individual)<br>NONE - RETIRED                                                                             |             | Occupation (for Individual)<br>RETIRED |                                                                                                              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>250.00     |                                                                                                              |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. MALMBERG, LARRY, , ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 26 / 2021<br><b>Transaction ID : A6C72F1520FE148DEB7E</b> |  |
| Mailing Address 1000 S HIGHWAY 395                                                                                              |             |                                        | Amount of Each Receipt this Period<br>12.50                                                                  |  |
| City<br>HERMISTON                                                                                                               | State<br>OR | Zip Code<br>97838-2663                 | <input checked="" type="checkbox"/> Memo Item                                                                |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                              |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>440.00     |                                                                                                              |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. HAMILTON, EARL, , ,</b>                |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 26 / 2021<br><b>Transaction ID : AFCEAEE71D6F34D7AA50</b> |  |
| Mailing Address 105 WINTER FOREST DR<br>APT 102                                                                                 |             |                                        | Amount of Each Receipt this Period<br>50.00                                                                  |  |
| City<br>CANDLER                                                                                                                 | State<br>NC | Zip Code<br>28715-0360                 | <input checked="" type="checkbox"/> Memo Item                                                                |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                              |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>440.00     |                                                                                                              |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                         |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                              |  |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIERNEY, MATTHEW, , ,

Mailing Address 401 RED CEDAR CT

City  
NASHVILLEState  
TNZip Code  
37214-4023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 7 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AEA3A587EBCC94182ABF

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBERTS, GARY, , ,

Mailing Address 1328 LONGSHORE LN

City  
LAKE HAVASU CITYState  
AZZip Code  
86404-5999FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 7 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A889CB2C030EC4C349B2

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALEState  
AZZip Code  
86324-0018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

825.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 7 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AF0E419BD22294C708D6

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALEState  
AZZip Code  
86324-0018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 7 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A893E345BFD704089A7C

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANEZ, OLGA, M, ,

Mailing Address 9655 CAMERON ST

City  
RANCHO CUCAMONGAState  
CAZip Code  
91730-5624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 7 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A57B318067BFA46BC854

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 7 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A12925BB6F29445E79C5

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 27    | 2021        |

Transaction ID : AA82B5FE134F1417B942

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 27    | 2021        |

Transaction ID : AF58738EC092A4D59BAB

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 27    | 2021        |

Transaction ID : AB0C467AF1D3F4D73A6E

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 27 / 2021

**Transaction ID : A3DC2625FBB8B45319DB**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 27 / 2021

**Transaction ID : A7101CEFFFE984056B9D**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 27 / 2021

**Transaction ID : ACEA26BB925D444969B9**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TAFT, NANCY, , ,**

Mailing Address **22377 CONCORD STREET**

City  
**SOUTHFIELD**

State  
**MI**

Zip Code  
**48076**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5900.00**

Date of Receipt

**05 / 27 / 2021**

**Transaction ID : A18E5677A24F84E05BB6**

Amount of Each Receipt this Period

**25.00**

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MALMBERG, LARRY, , ,**

Mailing Address **1000 S HIGHWAY 395**

City  
**HERMISTON**

State  
**OR**

Zip Code  
**97838-2663**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**450.00**

Date of Receipt

**05 / 27 / 2021**

**Transaction ID : A27FB2AC60E1D4869ABC**

Amount of Each Receipt this Period

**10.00**

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MCRAE, MARTHA, KAY, ,**

Mailing Address **PO BOX 9**

City  
**GRACEVILLE**

State  
**FL**

Zip Code  
**32440-0009**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1125.00**

Date of Receipt

**05 / 27 / 2021**

**Transaction ID : A0BE19130BD774046AED**

Amount of Each Receipt this Period

**50.00**

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**0.00**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLEMMER, LOUIS, W, ,**

Mailing Address 89 S ASHTON AVE

City  
MILLBRAEState  
CAZip Code  
94030-3052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
RETIRED US NAVY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 6 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A5708BE57954F435692D

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : ABBA2CC347F484A85AFD

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, DENNIS, , ,**Mailing Address 550 W TEXAS AVE  
STE 700City  
MIDLANDState  
TXZip Code  
79701-4250FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUMMIT PETROLEUMOccupation (for Individual)  
CHAIRMAN CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AD91E950F67604530860

Amount of Each Receipt this Period

500.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1000.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BEAMAN, DAVID, E, ,**

Mailing Address 333 TIGER TAIL DR

City State Zip Code  
ARROYO GRANDE CA 93420-4413

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : A7550E555016F4EE5BB8**

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. JONES, A.C., , ,**

Mailing Address 500 N SHORELINE BLVD

City State Zip Code  
CORPUS CHRISTI TX 78401-0399

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
JONES RANCH LLC

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : AEC63DA6368404C2D98C**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ISING, CHRISTIAN, , ,**

Mailing Address 2252 RAILROAD AVE

City State Zip Code  
LIVERMORE CA 94550-3123

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
EARL ISING, INC.

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

**06 / 03 / 2021**

**Transaction ID : A7763BEA0D4F145E2ABE**

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 125 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEN, JOANN, R, ,**

Mailing Address 13391 BANNER LAVA CAP RD

City  
NEVADA CITYState  
CAZip Code  
95959-8942FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOUSEWIFEOccupation (for Individual)  
HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 01    | 2021        |

**Transaction ID : ABF4BC4CEA342472E9C8**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARTON, JAMES, C, ,**

Mailing Address 6374 STRATFORD DR N

City  
FISHERSState  
INZip Code  
46038-1784FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 01    | 2021        |

**Transaction ID : A4B7E62C791094C13B07**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, MARY ALICE, , ,**

Mailing Address PO BOX 168

City  
PIEDMONTState  
SDZip Code  
57769-0168FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

**Transaction ID : A920C4B43D119473383D**

Amount of Each Receipt this Period

100.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEMMERMANN, SHERRI, , ,**

Mailing Address PO BOX 32837

City  
SAINT LOUIS

State  
MO

Zip Code  
63132-8837

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE GATESWORTH

Occupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : A3C7B4EB520134AAB9AE**

Amount of Each Receipt this Period

7.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARCHER, ROBERT, P, , SR.**

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2525

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : A262F8C8E720C40F698C**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARCHER, ROBERT, P, , SR.**

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2525

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : AD6EE3966AA504D84A64**

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |                                                                                                                                                                                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. BEALE, EDWIN, F, ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 10 MCGIBNEY RD<br>APT G3<br>City MOUNT VERNON State OH Zip Code 43050-1240<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 |  |  | Date of Receipt<br><input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2021"/><br><b>Transaction ID : A81C16A8A7DCA4204B64</b><br>Amount of Each Receipt this Period<br><input type="text" value="125.00"/><br><input checked="" type="checkbox"/> Memo Item |
| <b>B. AMYX, PAT, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 4382 N ROSEPOINT AVE<br>City MERIDIAN State ID Zip Code 83646-3702<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00             |  |  | Date of Receipt<br><input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2021"/><br><b>Transaction ID : A475C66279AD145DBBDD</b><br>Amount of Each Receipt this Period<br><input type="text" value="10.00"/><br><input checked="" type="checkbox"/> Memo Item  |
| <b>C. AMYX, PAT, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 4382 N ROSEPOINT AVE<br>City MERIDIAN State ID Zip Code 83646-3702<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.00             |  |  | Date of Receipt<br><input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2021"/><br><b>Transaction ID : A00B62C6202794C93A2B</b><br>Amount of Each Receipt this Period<br><input type="text" value="6.00"/><br><input checked="" type="checkbox"/> Memo Item   |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  | <input type="text" value="0.00"/>                                                                                                                                                                                                                                                                      |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  | <input type="text"/>                                                                                                                                                                                                                                                                                   |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DRUST, CAROL, , ,

Mailing Address 3501 BEECHWOOD RD

City  
GARNET VALLEYState  
PAZip Code  
19060-6816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A71047BAE1FF94793BE2

Amount of Each Receipt this Period

37.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOOD, HYMMAN, , REV.,

Mailing Address 701 W HERBERT AVE  
APT 16City  
REEDLEYState  
CAZip Code  
93654-3942FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A76055186F288404CB4F

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AMYX, PAT, , ,

Mailing Address 4382 N ROSEPOINT AVE

City  
MERIDIANState  
IDZip Code  
83646-3702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A1DB80B6770F7465B9AA

Amount of Each Receipt this Period

10.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, WILLIAM, E., ,**

Mailing Address 3320 W TULARE AVE

City  
VISALIA

State  
CA

Zip Code  
93277-1861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : A3DE15F427A284A2DAFD**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRISBIE, STEVEN, , ,**

Mailing Address PO BOX 698

City  
CADILLAC

State  
MI

Zip Code  
49601-0698

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : AB94CA395AD1541C39D8**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BACHTELL, RONDA, W, ,**

Mailing Address 2190 TAMARISK DR

City  
RENO

State  
NV

Zip Code  
89502-9749

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : A0F6375005B7F4E9CBFB**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIDRICH, HEINZ, K, ,

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.50

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A5560CF80902F46618DB

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CULP, JANICE, W, ,

Mailing Address 2216 S 3RD ST

City  
LAMESAState  
TXZip Code  
79331-5035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A70E4EAA975F1475E88F

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLOXOM, JENNIFER, , ,

Mailing Address 20305 NE 38TH ST

City  
SAMMAMISHState  
WAZip Code  
98074-4312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

342.50

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A92D38718E2B94F22877

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLOXOM, JENNIFER, , ,**

Mailing Address 20305 NE 38TH ST

City  
SAMMAMISH

State  
WA

Zip Code  
98074-4312

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2021

**Transaction ID : AC86C4B8B28F9418B9EC**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAK, HENRY, , ,**

Mailing Address 2 VILLAGE DR

City  
TRUMBULL

State  
CT

Zip Code  
06611-4800

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2021

**Transaction ID : A1D34A6F142F84083B47**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLOXOM, JENNIFER, , ,**

Mailing Address 20305 NE 38TH ST

City  
SAMMAMISH

State  
WA

Zip Code  
98074-4312

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

442.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 03 / 2021

**Transaction ID : A844154146FF34E2E970**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. BLOXOM, JENNIFER, , ,</b></p> <p>Mailing Address <b>20305 NE 38TH ST</b></p> <p>City <b>SAMMAMISH</b> State <b>WA</b> Zip Code <b>98074-4312</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/><b>442.50</b></p>         |  |  | <p>Date of Receipt<br/> <b>06 / 03 / 2021</b><br/> <b>Transaction ID : AB0093A6552EF4268B0B</b> </p> <p>Amount of Each Receipt this Period<br/><b>50.00</b></p> <p><input checked="" type="checkbox"/> Memo Item</p>  |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. FRIDRICH, HEINZ, K, ,</b></p> <p>Mailing Address <b>131 LONG POINT DR</b></p> <p>City <b>FERNANDINA BEACH</b> State <b>FL</b> Zip Code <b>32034-6410</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/><b>952.50</b></p> |  |  | <p>Date of Receipt<br/> <b>06 / 03 / 2021</b><br/> <b>Transaction ID : A7F039C926A414068A74</b> </p> <p>Amount of Each Receipt this Period<br/><b>20.00</b></p> <p><input checked="" type="checkbox"/> Memo Item</p>  |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. MCRAE, MARTHA, KAY, ,</b></p> <p>Mailing Address <b>PO BOX 9</b></p> <p>City <b>GRACEVILLE</b> State <b>FL</b> Zip Code <b>32440-0009</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼<br/><b>1400.00</b></p>                 |  |  | <p>Date of Receipt<br/> <b>06 / 03 / 2021</b><br/> <b>Transaction ID : A21C51965E0504203A5D</b> </p> <p>Amount of Each Receipt this Period<br/><b>125.00</b></p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  | <p><b>0.00</b></p>                                                                                                                                                                                                    |  |
| <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |                                                                                                                                                                                                                       |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

MM / DD / YYYY  
06 / 03 / 2021

Transaction ID : A4B335DF4BE89495CB20

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAHLER, WALTER, , ,**

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTON

State  
IN

Zip Code  
47977-8867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

MM / DD / YYYY  
06 / 03 / 2021

Transaction ID : A29C9C02FCE5649E688C

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAHLER, WALTER, , ,**

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTON

State  
IN

Zip Code  
47977-8867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

MM / DD / YYYY  
06 / 03 / 2021

Transaction ID : AE304197066A3476A8EB

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                        |                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. RODGERS, STEVE, A, ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>06 / 03 / 2021<br><b>Transaction ID : A1E679AE95CE647FDA84</b> |  |
| Mailing Address PO BOX 11902                                                                                                    |             |                                        | Amount of Each Receipt this Period<br>25.00                                                                |  |
| City<br>RENO                                                                                                                    | State<br>NV | Zip Code<br>89510-1902                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>1040.00    |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. TAMURA, RON, , ,</b>                   |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>06 / 03 / 2021<br><b>Transaction ID : A7D3724EF0C6944EFBFB</b> |  |
| Mailing Address PO BOX 94748                                                                                                    |             |                                        | Amount of Each Receipt this Period<br>25.00                                                                |  |
| City<br>ALBUQUERQUE                                                                                                             | State<br>NM | Zip Code<br>87199-4748                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>225.00     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. CARDOZA, LORI, , ,</b>                 |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>06 / 02 / 2021<br><b>Transaction ID : A412A7FC276A44A248A3</b> |  |
| Mailing Address 8410 AVENUE 184                                                                                                 |             |                                        | Amount of Each Receipt this Period<br>1450.00                                                              |  |
| City<br>TULARE                                                                                                                  | State<br>CA | Zip Code<br>93274-9491                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>SELF                                                                                       |             | Occupation (for Individual)<br>FARMER  |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>1450.00    |                                                                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                            |  |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAMON, ALBERT, , , III

Mailing Address 101 PINE HILL RD

City  
WAKEFIELDState  
RIZip Code  
02879-2824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A12FF9922F8584EA18FD

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEE, YONG, , ,

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECTState  
ILZip Code  
60056-3655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HTRD, LTD.Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 03  | 2021    |

Transaction ID : AECD1AE351F134F56A5B

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, RICHARD, N, ,

Mailing Address 9885 MELBA LN

City  
WHITESVILLEState  
KYZip Code  
42378-9418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HUNTER DOUGLASOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

412.50

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : ADFDA951125144CC9881

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : A3ADEB79599F74D1481F**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BUESING, JERRY, , ,**

Mailing Address 18972 N 98TH WAY

City

SCOTTSDALE

State  
AZ

Zip Code  
85255-2592

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BUESING CORP.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : ACD75382ED63D47549B8**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BELEW, GLEN, , ,**

Mailing Address 250 IDLELAKE CT

City

SUMTER

State  
SC

Zip Code  
29150-1128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A8E3B6FD4A88E4A8BBDB**

Amount of Each Receipt this Period

17.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ISING, CHRISTIAN, , ,

Mailing Address 2252 RAILROAD AVE

City  
LIVERMOREState  
CAZip Code  
94550-3123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EARL ISING, INC.Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : A3F0F7AF00FA64B6FB73

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLEN, JOANN, R, ,

Mailing Address 13391 BANNER LAVA CAP RD

City  
NEVADA CITYState  
CAZip Code  
95959-8942FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOUSEWIFEOccupation (for Individual)  
HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 30    | 2021        |

Transaction ID : A267ACA69F41F412E8D6

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEMMERMANN, SHERRI, , ,

Mailing Address PO BOX 32837

City  
SAINT LOUISState  
MOZip Code  
63132-8837FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE GATESWORTHOccupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : AE285A1A0C7144632B27

Amount of Each Receipt this Period

5.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENDRESEN, BARBARA, A, ,**

Mailing Address 17047 ROSEBUD DR

City  
YORBA LINDA

State  
CA

Zip Code  
92886-2233

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

THE CENTER FOR INDIVIDUAL & FAMILY THE

Occupation (for Individual)

MARRIAGE/FAMILY THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A28998F1EBC644DE0B00**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.50

Date of Receipt

**05 / 30 / 2021**

**Transaction ID : AC57FAFAE0AA641AF85D**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

332.50

Date of Receipt

**05 / 30 / 2021**

**Transaction ID : A489557FE183645C6826**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROWN, WILLIAM, T, ,

Mailing Address 270 MITCHELL AVE

City  
TULAREState  
CAZip Code  
93274-1394FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 3 | 0 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A77FD330D641544EFB83

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, KELLY, , ,

Mailing Address 10 HAWTHORNE WAY

City  
HARTSDALEState  
NYZip Code  
10530-3005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 3 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A62EC5760E6CD414BB71

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOOD, HYMMAN, , REV.,

Mailing Address 701 W HERBERT AVE  
APT 16City  
REEDLEYState  
CAZip Code  
93654-3942FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 3 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AAE6E69D9A9C94D1FA25

Amount of Each Receipt this Period

125.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DELOHERY, THOMAS, , ,**

Mailing Address 79 CALUMET AVE

City  
OAKLAND

State  
NJ

Zip Code  
07436-2902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2021

Transaction ID : AD7858D7AB8F74B48A84

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City  
RIO RANCHO

State  
NM

Zip Code  
87124-7621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2021

Transaction ID : A5A5431CE07E34FA98C0

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City  
RIO RANCHO

State  
NM

Zip Code  
87124-7621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2021

Transaction ID : A5173F402C9F14827A60

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRIGGS, JOHN, M, ,**

Mailing Address 435 WILLIAMS RD

City  
WYNNEWOOD

State  
PA

Zip Code  
19096-1632

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A9C7AEF99D474493BAA8**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRIGGS, JOHN, M, ,**

Mailing Address 435 WILLIAMS RD

City  
WYNNEWOOD

State  
PA

Zip Code  
19096-1632

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A61BCB87312B143908C9**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEPORT, IRMA, , ,**

Mailing Address PO BOX 674

City  
UNION

State  
KY

Zip Code  
41091-0674

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A3A46BD497B9A4A5C84B**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEPORT, IRMA, , ,**

Mailing Address PO BOX 674

City  
UNION

State  
KY

Zip Code  
41091-0674

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A1E47516FF2E64A92AD9**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, WILLIAM, T, ,**

Mailing Address 270 MITCHELL AVE

City  
TULARE

State  
CA

Zip Code  
93274-1394

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A01BF8C9E33A6406A8CE**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUHLESTEIN, RALPH, , ,**

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.50

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A8D01C23E5E8041B9BCA**

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CALEGAR, MICHAEL, , ,

Mailing Address PO BOX 4744

City  
POCATELLOState  
IDZip Code  
83205-4744FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : AF7EF9757FFBA4214A1F

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DODGE, MARY, , ,

Mailing Address 267 BAREFOOT BEACH BLVD  
APT 301City  
BONITA SPRINGSState  
FLZip Code  
34134-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : A31446134BEB44EC4927

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DODGE, MARY, , ,

Mailing Address 267 BAREFOOT BEACH BLVD  
APT 301City  
BONITA SPRINGSState  
FLZip Code  
34134-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : ADFCFF2217AE3417483C

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |                                                                                                                                                                                                                        |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. GALLAGHER, TRUDI, , ,</b></p> <p>Mailing Address <b>9 QUARTER MILE RD</b></p> <p>City <b>ARMONK</b> State <b>NY</b> Zip Code <b>10504-1324</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/><b>552.50</b></p>    |  |  | <p>Date of Receipt<br/> <b>05 / 31 / 2021</b><br/> <b>Transaction ID : A0DC433080635440F97F</b> </p> <p>Amount of Each Receipt this Period<br/> <b>15.00</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. BAHLER, WALTER, , ,</b></p> <p>Mailing Address <b>5927 S CREEKSIDE CT</b></p> <p>City <b>REMINGTON</b> State <b>IN</b> Zip Code <b>47977-8867</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/><b>310.00</b></p> |  |  | <p>Date of Receipt<br/> <b>05 / 31 / 2021</b><br/> <b>Transaction ID : A7079976A0D214438AD5</b> </p> <p>Amount of Each Receipt this Period<br/> <b>25.00</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. YANEZ, OLGA, M, ,</b></p> <p>Mailing Address <b>9655 CAMERON ST</b></p> <p>City <b>RANCHO CUCAMONGA</b> State <b>CA</b> Zip Code <b>91730-5624</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼<br/><b>245.00</b></p>  |  |  | <p>Date of Receipt<br/> <b>05 / 31 / 2021</b><br/> <b>Transaction ID : A40D8614A8ECF45C4960</b> </p> <p>Amount of Each Receipt this Period<br/> <b>12.50</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  | <p><b>0.00</b></p>                                                                                                                                                                                                     |  |
| <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |                                                                                                                                                                                                                        |  |



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1326.25

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : A02E495F88ACC4749BC3

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ERICKSON, SANDRA, D, ,

Mailing Address 118 MOCKERNUT CIR

City  
AIKENState  
SCZip Code  
29803-2708FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : AFFA273946BEF48E7875

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIDRICH, HEINZ, K, ,

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

872.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : AE4E700C1D9A8400185F

Amount of Each Receipt this Period

20.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.50

Date of Receipt

**05** / **31** / **2021**

**Transaction ID : A0D50F67965514F50824**

Amount of Each Receipt this Period

102.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.50

Date of Receipt

**05** / **31** / **2021**

**Transaction ID : A92F45657AE1B40D780F**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

872.50

Date of Receipt

**05** / **31** / **2021**

**Transaction ID : AC5A34C8EE5D540B5A2E**

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIDRICH, HEINZ, K, ,

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : AD2F8C055EB12496E8F6

Amount of Each Receipt this Period

102.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CULP, JANICE, W, ,

Mailing Address 2216 S 3RD ST

City  
LAMESAState  
TXZip Code  
79331-5035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : A91578C57CDB944BAB3C

Amount of Each Receipt this Period

15.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUSH, JEANETTE, , ,

Mailing Address 716 W PROVENTIAL DR

City  
ANAHEIMState  
CAZip Code  
92805-5142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : A440EB7274AB94DCD88A

Amount of Each Receipt this Period

5.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSH, JEANETTE, , ,**

Mailing Address 716 W PROVENTIAL DR

City  
ANAHEIM

State  
CA

Zip Code  
92805-5142

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : ACE1F1745DD4645E29E0**

Amount of Each Receipt this Period

1.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELLISON, PAUL, , ,**

Mailing Address 407 COUNTRY CLUB RD

City  
SALINA

State  
KS

Zip Code  
67401-3508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.50

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A6CC69184E5474EB49D9**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATT, DAVID, R, ,**

Mailing Address 212 ASHLEY 440 ROAD

City  
CROSSETT

State  
AR

Zip Code  
71635

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 31 / 2021**

**Transaction ID : A837FE613E9C04A54937**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBERT, MEGAN, , ,**

Mailing Address 1611 N HERMITAGE AVE

City  
CHICAGOState  
ILZip Code  
60622-1472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALTON MKTGOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : AC7471DBB92734FAA80B

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HACKER, SUSAN, , ,**

Mailing Address 1395 CRAWFORD AVE

City  
REEDLEYState  
CAZip Code  
93654-9761FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INSULFLOWOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 31    | 2021        |

Transaction ID : AE9E97B9234E9441D8A1

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A60C1F8D7781B478FB96

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, MARY, L, ,**

Mailing Address PO BOX 269

City  
SALUDA

State  
VA

Zip Code  
23149-0269

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.50

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A012E69580F294C2CAA4**

Amount of Each Receipt this Period

37.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, LISA, A, ,**

Mailing Address 14806 DONNA LN

City  
CROSBY

State  
TX

Zip Code  
77532-6040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
J MILLER ELECTRIC INC

Occupation (for Individual)  
ELECTRICAL ENGINEER/CONSTRUC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A6BC42BB7880946DBB60**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, LISA, A, ,**

Mailing Address 14806 DONNA LN

City  
CROSBY

State  
TX

Zip Code  
77532-6040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
J MILLER ELECTRIC INC

Occupation (for Individual)  
ELECTRICAL ENGINEER/CONSTRUC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A6EC77112B20346099EA**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, LISA, A, ,**

Mailing Address 14806 DONNA LN

City  
CROSBY

State  
TX

Zip Code  
77532-6040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

J MILLER ELECTRIC INC

Occupation (for Individual)

ELECTRICAL ENGINEER/CONSTRUC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A51797886CB5D4C0199A**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, LISA, A, ,**

Mailing Address 14806 DONNA LN

City  
CROSBY

State  
TX

Zip Code  
77532-6040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

J MILLER ELECTRIC INC

Occupation (for Individual)

ELECTRICAL ENGINEER/CONSTRUC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AE2ED36EE6BEC4803A09**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, LISA, A, ,**

Mailing Address 14806 DONNA LN

City  
CROSBY

State  
TX

Zip Code  
77532-6040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

J MILLER ELECTRIC INC

Occupation (for Individual)

ELECTRICAL ENGINEER/CONSTRUC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A728816AA19FD4506990**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                                            |                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. MOORE, DANIEL, J., ,</b>               |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>04 / 29 / 2021</div> </div> |  |
| Mailing Address 4605 CANYONWOOD DR                                                                                              |             |                                                            | <b>Transaction ID : A12654E74E7B347CEA1E</b>                                               |  |
| City<br>AUSTIN                                                                                                                  | State<br>TX | Zip Code<br>78735-6606                                     | Amount of Each Receipt this Period<br><div> <div>211.61</div> </div>                       |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                                            |                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br><div> <div>211.61</div> </div> |                                                                                            |  |

|                                                                                                                                 |             |                                                            |                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. MORRIS, ROBERT, , ,</b>                |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>04 / 29 / 2021</div> </div> |  |
| Mailing Address 98 RIVERSIDE AVE                                                                                                |             |                                                            | <b>Transaction ID : A714F99654AA4492A85D</b>                                               |  |
| City<br>RIVERSIDE                                                                                                               | State<br>CT | Zip Code<br>06878-1619                                     | Amount of Each Receipt this Period<br><div> <div>250.00</div> </div>                       |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                                            |                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br><div> <div>250.00</div> </div> |                                                                                            |  |

|                                                                                                                               |             |                                                            |                                                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. NELSON, WILLIAM, E., ,</b>           |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>04 / 29 / 2021</div> </div> |  |
| Mailing Address 3320 W TULARE AVE                                                                                             |             |                                                            | <b>Transaction ID : A6EF7169439F44BB4B7E</b>                                               |  |
| City<br>VISALIA                                                                                                               | State<br>CA | Zip Code<br>93277-1861                                     | Amount of Each Receipt this Period<br><div> <div>25.00</div> </div>                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                               |             |                                                            |                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                  |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Aggregate Year-to-Date ▼<br><div> <div>276.50</div> </div> |                                                                                            |  |

|                                                                  |                              |
|------------------------------------------------------------------|------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <div> <div>0.00</div> </div> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <div> <div></div> </div>     |



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NELSON, WILLIAM, E., ,

Mailing Address 3320 W TULARE AVE

City  
VISALIAState  
CAZip Code  
93277-1861FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A089642CE83CE4B2FAA3

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MJOLSNESS, SALLY, A., ,

Mailing Address 748 TUSCANY WAY

City  
EDMONDState  
OKZip Code  
73034-6786FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A8BFFF4AA2E9E4124BE9

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MJOLSNESS, SALLY, A., ,

Mailing Address 748 TUSCANY WAY

City  
EDMONDState  
OKZip Code  
73034-6786FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A0FEE3BC7195040BC92D

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MJOLSNESS, SALLY, A, ,**

Mailing Address 748 TUSCANY WAY

City  
EDMOND

State  
OK

Zip Code  
73034-6786

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : ABA9529DE5A81421AB14

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A136B319BBC1E4015820

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A74435E21A761415C805

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A0D461A17441845D7980

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A48A2E6DC8CA848D8B7E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A0EA41BF6A3D545CB809

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A9F1345E9B3894C60A22**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A2F65B2B4258446398D7**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A6639B4EB154E43BF8FC**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AAEAE113735CC45598E4

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A6AE1D9918DF44F3B898

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A7D82FB307718451BAED

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A9F17BD2FAD32412EBEB

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AAF23C7E8C1F842F6BCC

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, BETTY, , ,**

Mailing Address 5823 INDIAN TRL

City  
HOUSTON

State  
TX

Zip Code  
77057-1306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A49201F0707254FE19E3

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 OF 426

(check only one)

|                              |                              |                              |                                                         |
|------------------------------|------------------------------|------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12                  |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, BETTY, , ,

Mailing Address 5823 INDIAN TRL

City  
HOUSTONState  
TXZip Code  
77057-1306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AD67EE2E84EEF4665962

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOORE, BETTY, , ,

Mailing Address 5823 INDIAN TRL

City  
HOUSTONState  
TXZip Code  
77057-1306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AA10FBC74ECA849B8A7E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, BETTY, , ,

Mailing Address 5823 INDIAN TRL

City  
HOUSTONState  
TXZip Code  
77057-1306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A99F3014064E44A49ABE

Amount of Each Receipt this Period

20.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORELLI, DONALD, H, ,

Mailing Address 4739 BLEDSOE RD

City  
DENAIRState  
CAZip Code  
95316-9613FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MORELLI RANCHOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A93DF99FED467499FB5B

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A46F33AFF68B94F7C837

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, MARVIN, E, ,

Mailing Address 370 APRICOT ST

City  
NIPOMOState  
CAZip Code  
93444-9138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 27  | 2021    |

Transaction ID : AD5A27B125723449F998

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, EDNA, I, ,**

Mailing Address 24724 VALLEY ST  
APT 102

City  
NEWHALL

State  
CA

Zip Code  
91321-2662

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.50

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : A69EE7BD7989F411F987**

Amount of Each Receipt this Period

172.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, EDNA, I, ,**

Mailing Address 24724 VALLEY ST  
APT 102

City  
NEWHALL

State  
CA

Zip Code  
91321-2662

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.50

Date of Receipt

**05 / 20 / 2021**

**Transaction ID : A9B55EE2A08A44A2C8BC**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, JOSEPHINE, G, MRS.,**

Mailing Address 400 W LOGAN ST  
APT 3C

City  
RUSHVILLE

State  
IL

Zip Code  
62681-1480

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : A20E8A00D7C6F47B9959**

Amount of Each Receipt this Period

100.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNTER, JEFFREY, , ,**

Mailing Address 4546 HIGHLAND WOODS WAY

City  
POWELL

State  
TN

Zip Code  
37849-2726

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

ACTAGRO

Occupation (for Individual)

DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : AEEF3A046CD4B41BF9F1**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUNTINGTON, LOUIS, H, , JR.**

Mailing Address 820 PARK ROW  
# 510

City  
SALINAS

State  
CA

Zip Code  
93901-2406

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

HUNTINGTON FARMS

Occupation (for Individual)

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : A87D0D382D8824196B2F**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HYNES, TERENCE, , ,**

Mailing Address 109 PALISADE AVE

City  
CRESSKILL

State  
NJ

Zip Code  
07626-2258

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : AE746524A2802432F917**

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)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JETT, THOMAS, LAWRENCE, MR.,**

Mailing Address 1862 MORA AVE

City

SANTA YNEZ

State

CA

Zip Code

93460-9732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

SELF

Occupation (for Individual)

REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : A7299CCAFF7D94D128D0**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IMMLER, EDELTRAUT, , ,**

Mailing Address 17877 GARDENIA LN

City

CLINTON TWP

State

MI

Zip Code

48036-2048

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : ABDFEB4DFF1E4449CAD1**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City

VISALIA

State

CA

Zip Code

93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : AAE37C83EA0174F9796F**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
TRANSFER FROM JFC

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOHLFORD, JAMES, , ,**

Mailing Address 24186 LOMITAS DR

City  
WOODLAKE

State  
CA

Zip Code  
93286-9505

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 10 / 2021**

**Transaction ID : A898F32D21AC54BFEB1B**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOD, HYMMAN, , REV.,**

Mailing Address 701 W HERBERT AVE  
APT 16

City  
REEDLEY

State  
CA

Zip Code  
93654-3942

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : AB6C42467D2824E23942**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNUS, LOURDES, M, ,**

Mailing Address 6015 W ARDMORE AVE

City  
CHICAGO

State  
IL

Zip Code  
60646-5312

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : ACE027DB894D5453C984**

Amount of Each Receipt this Period

37.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YANEZ, OLGA, M, ,**

Mailing Address 9655 CAMERON ST

City  
RANCHO CUCAMONGA

State  
CA

Zip Code  
91730-5624

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

**Transaction ID : AF063AC8A7CD842C0905**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YANEZ, OLGA, M, ,**

Mailing Address 9655 CAMERON ST

City  
RANCHO CUCAMONGA

State  
CA

Zip Code  
91730-5624

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

**Transaction ID : A8D8725AC0DFB4A37806**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YANEZ, OLGA, M, ,**

Mailing Address 9655 CAMERON ST

City  
RANCHO CUCAMONGA

State  
CA

Zip Code  
91730-5624

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 25 / 2021

**Transaction ID : A3282461DC8C84552946**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : A81179BDA5C5E44109C7**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. LARSON, GEORGE, R, ,**

Mailing Address 39 VIA ALICIA

City

SANTA BARBARA

State  
CA

Zip Code  
93108-1746

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GEOFILS CONSULTENTS

Occupation (for Individual)  
GEOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **13** / **2021**

**Transaction ID : AB781A8E5ED3040E5A32**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. KRISTIANSON, JOHN, , ,**

Mailing Address 6320 E LOS SANTOS DR

City

LONG BEACH

State  
CA

Zip Code  
90815-3321

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **11** / **2021**

**Transaction ID : A54FA4B8701B44C98A54**

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRUGER, DONALD, , ,**

Mailing Address 25225 SW GRAHAMS FERRY RD

City  
SHERWOOD

State  
OR

Zip Code  
97140-9024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : A235DAA2500E6445EBFA**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEMMERMANN, SHERRI, , ,**

Mailing Address PO BOX 32837

City  
SAINT LOUIS

State  
MO

Zip Code  
63132-8837

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE GATESWORTH

Occupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : ACC39DAECF73E49C49FD**

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEMMERMANN, SHERRI, , ,**

Mailing Address PO BOX 32837

City  
SAINT LOUIS

State  
MO

Zip Code  
63132-8837

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE GATESWORTH

Occupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : AE221DAA903C44304A45**

Amount of Each Receipt this Period

2.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEMMERMANN, SHERRI, , ,

Mailing Address PO BOX 32837

City  
SAINT LOUISState  
MOZip Code  
63132-8837FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE GATESWORTHOccupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AA4202D6F45A24A8F861

Amount of Each Receipt this Period

7.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEMMERMANN, SHERRI, , ,

Mailing Address PO BOX 32837

City  
SAINT LOUISState  
MOZip Code  
63132-8837FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE GATESWORTHOccupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AE2CD115057544C5DAC5

Amount of Each Receipt this Period

7.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRAMER, WILLIAM, , ,

Mailing Address 211 CROOKED CREEK DR

City  
RICHARDSONState  
TXZip Code  
75080-2024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A20DB272C3349445F8C1

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).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEVY, LINDA, , ,**

Mailing Address 9059 SANDERSON CT

City  
BOYNTON BEACH

State  
FL

Zip Code  
33473-4991

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

**Transaction ID : AF1FCEC1DEFB64067BDE**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVY, LINDA, , ,**

Mailing Address 9059 SANDERSON CT

City  
BOYNTON BEACH

State  
FL

Zip Code  
33473-4991

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

**Transaction ID : A24ACC9D48F0B4C86973**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVY, LINDA, , ,**

Mailing Address 9059 SANDERSON CT

City  
BOYNTON BEACH

State  
FL

Zip Code  
33473-4991

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

**Transaction ID : AE5DE4ECCC23E43468A2**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEVY, LINDA, , ,

Mailing Address 9059 SANDERSON CT

City  
BOYNTON BEACH

State  
FL

Zip Code  
33473-4991

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A3259098A032F43BC84F

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRUSE, RONALD, , ,

Mailing Address 435 N EQUESTRIAN DR

City  
ORANGE

State  
CA

Zip Code  
92869-4423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2021

Transaction ID : AD03E6EFA70A44B2FA80

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEE, YONG, , ,

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECT

State  
IL

Zip Code  
60056-3655

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HTRD, LTD.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2021

Transaction ID : AC8EC78E4066D4519BF4

Amount of Each Receipt this Period

12.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEE, YONG, , ,

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECTState  
ILZip Code  
60056-3655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HTRD, LTD.Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AF1D2B6056C8C4C328F3

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEE, YONG, , ,

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECTState  
ILZip Code  
60056-3655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HTRD, LTD.Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 5 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AD6A6A31D594F45C7B9F

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEMMONS, JOHN, , ,

Mailing Address 1973 ROSE VALLEY RD

City  
KELSOState  
WAZip Code  
98626-9672FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PACIFIC FIBRE PRODUCTSOccupation (for Individual)  
FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : ACA30B41FF15249DBA21

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

**Transaction ID : A85DACF5EE31549A5A72**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERISSIMO, ARTHUR, , ,**

Mailing Address 8 EDGEFIELD CT

City  
NAPAState  
CAZip Code  
94558-7211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 27  | 2021    |

**Transaction ID : A7507FDA1EF7D4BD384E**

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TREMBLAY, DONALD, P, ,**

Mailing Address 6 QUAKER RD

City  
ANDOVERState  
NJZip Code  
07821-2306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 13  | 2021    |

**Transaction ID : AB45183C6B1764187910**

Amount of Each Receipt this Period

250.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VOCCOLA, FREDERICK, , ,

Mailing Address 63 FISHER PL

City  
RED BANKState  
NJZip Code  
07701-2317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BMC SOFTWAREOccupation (for Individual)  
SVP SALES AND OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 7 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A3139711F89964167AC9

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TURNER, MARYJANE, , ,

Mailing Address 50 GRAFTON ST

City  
NEWTONState  
MAZip Code  
02459-1545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A4E267F4A06B84A4E9F3

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VOGT, GERALDINE, , ,

Mailing Address 3004 LAKE CHAPEAU DR

City  
ALBERT LEAState  
MNZip Code  
56007-4306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 7 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A07C6A1A9D500440A952

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)..... ▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VITENSON, JEROME, , ,**

Mailing Address 389 PACIFIC AVE

City  
PACIFICA

State  
CA

Zip Code  
94044-2623

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : AE477FAE4FE394E61905**

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VIDOVIH, PATRICIA, , ,**

Mailing Address 24961 NELLIE GAIL RD

City  
LAGUNA HILLS

State  
CA

Zip Code  
92653-5821

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A025E61FE4FAE4F7389A**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VIDOVIH, PATRICIA, , ,**

Mailing Address 24961 NELLIE GAIL RD

City  
LAGUNA HILLS

State  
CA

Zip Code  
92653-5821

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A25D26F40436A400781E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 175 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAN GRONINGEN, PEGGY, L, ,

Mailing Address 16999 MELLO RD

City  
RIPONState  
CAZip Code  
95366-9259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

WALNUT FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 27  | 2021    |

Transaction ID : A1AAE557D82BD49A9921

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TUREK, DAVID, , ,

Mailing Address 461 MAHANEY RD

City

KING FERRY

State  
NYZip Code  
13081-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

TUREK FARMS MANAGEMENT, INC

Occupation (for Individual)

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 18  | 2021    |

Transaction ID : A2EC9F3DF9F8A42D99E3

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUREK, DAVID, , ,

Mailing Address 461 MAHANEY RD

City

KING FERRY

State  
NYZip Code  
13081-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

TUREK FARMS MANAGEMENT, INC

Occupation (for Individual)

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 25  | 2021    |

Transaction ID : A1F4CE0A664B84820B52

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A59EBBB697B19402F84E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHANEY, CLAUDIA, , ,**

Mailing Address PO BOX 218

City  
GARDEN CITYState  
TXZip Code  
79739-0218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
NONE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 6 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AD30AC8EE0EAF4CE290A

Amount of Each Receipt this Period

375.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONNER, DEBHRA, , ,**

Mailing Address 4253 MARGERY DR

City  
FREMONTState  
CAZip Code  
94538-2826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AF0EF13B93CC24AACA74

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLEMAN, DOUGLAS, , ,**

Mailing Address 34522 N SCOTTSDALE RD

City  
SCOTTSDALE

State  
AZ

Zip Code  
85266-1224

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 03 / 2021**

**Transaction ID : A43FD6DE3FF7D4DF7A96**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.50

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : ABFF9887D204C4A8D9BC**

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

322.50

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A0A0781867D474B7CB76**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAFFEY, EUNICE, L, ,

Mailing Address 725 1ST ST S  
UNIT 101City  
KIRKLANDState  
WAZip Code  
98033-6552FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A0222D9525CFB436EB63

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAYWOOD, JON, D, ,

Mailing Address PO BOX 654

City  
TRANQUILLITYState  
CAZip Code  
93668-0654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
FARMNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : AD5949C239FA944B598B

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHUCK, AILEEN, , ,

Mailing Address 8144 VILLAGE 8

City  
CAMARILLOState  
CAZip Code  
93012-6928FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 26    | 2021        |

Transaction ID : A9F742715C3674C63887

Amount of Each Receipt this Period

125.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 OF 426

(check only one)

|                              |                              |                              |                                                         |
|------------------------------|------------------------------|------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12                  |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C

C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A890BCBD16FF24B1AAF2

Amount of Each Receipt this Period

625.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EASTMAN, SAGE, , ,**

Mailing Address 3643 TRINITY DR

City

ALEXANDRIA

State  
VAZip Code  
22304-1840FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEHLMAN CASTAGNETTI ROSEN THOMASOccupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : AE23A90478DBD4630ADE

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOWNS, DARIAN, , ,**

Mailing Address 8483 PORTLAND PL

City

MCLEAN

State  
VAZip Code  
22102-1730FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : AC959BF504D414E208D5

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

625.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : AB0C5DA4320A544B7B46

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, CHARLIE, , ,**

Mailing Address 28122 PASEO RINCON

City  
MISSION VIEJOState  
CAZip Code  
92692-2626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A1C33CE56FD7941DB97E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONTRERAS-TANORI, MARIA, L, ,**

Mailing Address 1196 OXTON DR

City  
SAN JOSEState  
CAZip Code  
95121-2246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : AECDE5635791C429A881

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 181 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORTState  
NYZip Code  
11731-5607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

**Transaction ID : AD7D682E6B7FD405BBD1**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORTState  
NYZip Code  
11731-5607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

**Transaction ID : A4216240EB6704D9EAD2**

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORTState  
NYZip Code  
11731-5607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

**Transaction ID : A76B6B491446D4507A02**

Amount of Each Receipt this Period

12.50

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AD95E62486057420C9C7

Amount of Each Receipt this Period

2.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A9A1B60ED49644647A76

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A1BA2762103484EFB85B

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A89E897C5ECC8481D84D**

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A9ADF2E3F7CAF42ABB9A**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A860701052D6945188EC**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |                    |                                               |                                                                   |  |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------|-------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. CLINTON, VIVIAN, , ,</b>               |                    |                                               | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>04 / 29 / 2021</b> |  |
| Mailing Address <b>36 ELCHESTER DR</b>                                                                                          |                    |                                               | <b>Transaction ID : AF61FEB7BCC2149529AB</b>                      |  |
| City<br><b>EAST NORTHPORT</b>                                                                                                   | State<br><b>NY</b> | Zip Code<br><b>11731-5607</b>                 | Amount of Each Receipt this Period<br><b>5.00</b>                 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                          |                    |                                               | <input checked="" type="checkbox"/> Memo Item                     |  |
| Name of Employer (for Individual)<br><b>RETIRED</b>                                                                             |                    | Occupation (for Individual)<br><b>RETIRED</b> |                                                                   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Aggregate Year-to-Date ▼<br><b>305.00</b>     |                                                                   |  |

|                                                                                                                                 |                    |                                               |                                                                   |  |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------|-------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. CLINTON, VIVIAN, , ,</b>               |                    |                                               | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>04 / 29 / 2021</b> |  |
| Mailing Address <b>36 ELCHESTER DR</b>                                                                                          |                    |                                               | <b>Transaction ID : A19181969A9574ED798E</b>                      |  |
| City<br><b>EAST NORTHPORT</b>                                                                                                   | State<br><b>NY</b> | Zip Code<br><b>11731-5607</b>                 | Amount of Each Receipt this Period<br><b>2.50</b>                 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                          |                    |                                               | <input checked="" type="checkbox"/> Memo Item                     |  |
| Name of Employer (for Individual)<br><b>RETIRED</b>                                                                             |                    | Occupation (for Individual)<br><b>RETIRED</b> |                                                                   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Aggregate Year-to-Date ▼<br><b>305.00</b>     |                                                                   |  |

|                                                                                                                               |                    |                                               |                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------|-------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. CLINTON, VIVIAN, , ,</b>             |                    |                                               | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>04 / 29 / 2021</b> |  |
| Mailing Address <b>36 ELCHESTER DR</b>                                                                                        |                    |                                               | <b>Transaction ID : ADD39111AD7A34D529E6</b>                      |  |
| City<br><b>EAST NORTHPORT</b>                                                                                                 | State<br><b>NY</b> | Zip Code<br><b>11731-5607</b>                 | Amount of Each Receipt this Period<br><b>5.00</b>                 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                        |                    |                                               | <input checked="" type="checkbox"/> Memo Item                     |  |
| Name of Employer (for Individual)<br><b>RETIRED</b>                                                                           |                    | Occupation (for Individual)<br><b>RETIRED</b> |                                                                   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                    | Aggregate Year-to-Date ▼<br><b>305.00</b>     |                                                                   |  |

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**0.00**



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A156458123E424554878

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLINTON, VIVIAN, , ,**

Mailing Address 36 ELCHESTER DR

City  
EAST NORTHPORT

State  
NY

Zip Code  
11731-5607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A6FE1AEDDEFA2F4AA0A78

Amount of Each Receipt this Period

2.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAFFEY, EUNICE, L, ,**

Mailing Address 725 1ST ST S  
UNIT 101

City  
KIRKLAND

State  
WA

Zip Code  
98033-6552

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A00982792868145BEBD0

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAFFEY, EUNICE, L, ,

Mailing Address 725 1ST ST S  
UNIT 101City  
KIRKLANDState  
WAZip Code  
98033-6552FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A1493F18624554D1E8F4

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHUCK, AILEEN, , ,

Mailing Address 8144 VILLAGE 8

City  
CAMARILLOState  
CAZip Code  
93012-6928FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A05B4FF5602E34922A35

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A9FAEB56F9DE9429DBCD

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NETHERCUTT, ROBERT, C.,

Mailing Address 22360 RICKARD RD

City  
BENDState  
ORZip Code  
97702-9285FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A2135567F1E8742EDB01

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OAKES, JOHN, O'DELL, ,

Mailing Address PO BOX 32

City

PALO CEDRO

State

CA

Zip Code

96073-0032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SBL CO.Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A51F94B18D42D46188D8

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOSSEL, JOHN, W.,

Mailing Address 2 PENHURST CT

City

REHOBOTH BEACH

State

DE

Zip Code

19971-8644

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 6 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A8D760578DC324226A55

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, WILLIAM, E., ,**

Mailing Address 3320 W TULARE AVE

City  
VISALIA

State  
CA

Zip Code  
93277-1861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

**05** / **18** / **2021**

**Transaction ID : A35BD6FFB916548C4B6C**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, WILLIAM, E., ,**

Mailing Address 3320 W TULARE AVE

City  
VISALIA

State  
CA

Zip Code  
93277-1861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A1EBA63EC790E4D70A20**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, WILLIAM, E., ,**

Mailing Address 3320 W TULARE AVE

City  
VISALIA

State  
CA

Zip Code  
93277-1861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

354.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A0DA5DAB1738C4BEEB82**

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NELSON, WILLIAM, E., ,**

Mailing Address 3320 W TULARE AVE

City  
VISALIA

State  
CA

Zip Code  
93277-1861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A9A043BD78F4943B0A37**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NELSON, WILLIAM, E., ,**

Mailing Address 3320 W TULARE AVE

City  
VISALIA

State  
CA

Zip Code  
93277-1861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A6597801A8BE34ED190B**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MUHLESTEIN, RALPH, , ,**

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.50

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A452F8097A9B544ADB99**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUHLESTEIN, RALPH, , ,**

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : AD40FFAB30236444F907**

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUHLESTEIN, RALPH, , ,**

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A00BB598D23774C67818**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUHLESTEIN, RALPH, , ,**

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : AD8ED4CED3C864E3AA35**

Amount of Each Receipt this Period

7.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUHLESTEIN, RALPH, , ,**

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : AAB982390E47E4C4E92F**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUSHEGAIN, RICHARD, , ,**

Mailing Address 404 PLUMOSA DR

City  
PASADENA

State  
CA

Zip Code  
91107-5323

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MUSHEGAIN INDUSTRIAL PROPERTIES

Occupation (for Individual)  
REAL ESTATE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **13** / **2021**

**Transaction ID : AAB6EA3ED88D42DA9BC**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : AF2885FBAB6014DA9A30**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
TRANSFER FROM JFC

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |                    |                                                 |                                                                   |  |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------------|-------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. SMITH, ELAINE, , ,</b>                 |                    |                                                 | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>04 / 29 / 2021</b> |  |
| Mailing Address <b>99590 N BANK CHETCO RIVER RD</b><br><b>CHET</b>                                                              |                    |                                                 | <b>Transaction ID : A1CF259DAD9984281916</b>                      |  |
| City<br><b>BROOKINGS</b>                                                                                                        | State<br><b>OR</b> | Zip Code<br><b>97415-8257</b>                   | Amount of Each Receipt this Period<br><b>150.00</b>               |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                          |                    |                                                 | <input checked="" type="checkbox"/> Memo Item                     |  |
| Name of Employer (for Individual)<br><b>HOMEMAKER</b>                                                                           |                    | Occupation (for Individual)<br><b>HOMEMAKER</b> |                                                                   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Aggregate Year-to-Date ▼<br><b>300.00</b>       |                                                                   |  |

|                                                                                                                                 |                    |                                               |                                                                   |  |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------|-------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. SERIO, PATRICIA, A, ,</b>              |                    |                                               | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>04 / 29 / 2021</b> |  |
| Mailing Address <b>20134 E DAMERAL DR</b>                                                                                       |                    |                                               | <b>Transaction ID : AF1066BB8E5A24473A92</b>                      |  |
| City<br><b>COVINA</b>                                                                                                           | State<br><b>CA</b> | Zip Code<br><b>91724-3937</b>                 | Amount of Each Receipt this Period<br><b>50.00</b>                |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                          |                    |                                               | <input checked="" type="checkbox"/> Memo Item                     |  |
| Name of Employer (for Individual)<br><b>RETIRED</b>                                                                             |                    | Occupation (for Individual)<br><b>RETIRED</b> |                                                                   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Aggregate Year-to-Date ▼<br><b>250.00</b>     |                                                                   |  |

|                                                                                                                               |                    |                                               |                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------|-------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. SERIO, PATRICIA, A, ,</b>            |                    |                                               | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>04 / 29 / 2021</b> |  |
| Mailing Address <b>20134 E DAMERAL DR</b>                                                                                     |                    |                                               | <b>Transaction ID : A88AF4E128ED140F1974</b>                      |  |
| City<br><b>COVINA</b>                                                                                                         | State<br><b>CA</b> | Zip Code<br><b>91724-3937</b>                 | Amount of Each Receipt this Period<br><b>50.00</b>                |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                        |                    |                                               | <input checked="" type="checkbox"/> Memo Item                     |  |
| Name of Employer (for Individual)<br><b>RETIRED</b>                                                                           |                    | Occupation (for Individual)<br><b>RETIRED</b> |                                                                   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                    | Aggregate Year-to-Date ▼<br><b>250.00</b>     |                                                                   |  |

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**0.00**



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEMLER, JERRY, DORAN, ,**

Mailing Address 7920 BEAUMONT GREEN WEST DR

City  
INDIANAPOLIS

State  
IN

Zip Code  
46250-1651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : ACE14D4F247FF4DBB903**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHULZE, DOUGLAS, , ,**

Mailing Address 20123 S CEDAR LN

City  
PINE GROVE

State  
CA

Zip Code  
95665-9682

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AD28A23B31C3D40F8B44**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN SCYOC, CHERYL, ANN, ,**

Mailing Address PO BOX 576

City  
PIXLEY

State  
CA

Zip Code  
93256-0576

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PIXLEY AUTO PARTS

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A8B65862441824F33B70**

Amount of Each Receipt this Period

100.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                        |                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. SLEPIAN, LINDA, J, ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A2DDFEC7F27CC4AA3A6f</b> |  |
| Mailing Address 328 SCOTTSDALE DR                                                                                               |             |                                        | Amount of Each Receipt this Period<br>150.00                                                               |  |
| City<br>TROY                                                                                                                    | State<br>MI | Zip Code<br>48084-1721                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>837.50     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. SLEPIAN, LINDA, J, ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : AA2E510EF7884480CAC2</b> |  |
| Mailing Address 328 SCOTTSDALE DR                                                                                               |             |                                        | Amount of Each Receipt this Period<br>50.00                                                                |  |
| City<br>TROY                                                                                                                    | State<br>MI | Zip Code<br>48084-1721                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>837.50     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. SMITH, WILLIAM, M, ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A4CB7D2DC7DDA4BB1BB</b>  |  |
| Mailing Address 940 WEATHERMORE TRCE                                                                                            |             |                                        | Amount of Each Receipt this Period<br>40.00                                                                |  |
| City<br>HOSCHTON                                                                                                                | State<br>GA | Zip Code<br>30548-3486                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>340.00     |                                                                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                            |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, WILLIAM, M, ,**

Mailing Address 940 WEATHERMORE TRCE

City  
HOSCHTON

State  
GA

Zip Code  
30548-3486

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AEF7B0C4D7E854059ABF**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, WILLIAM, M, ,**

Mailing Address 940 WEATHERMORE TRCE

City  
HOSCHTON

State  
GA

Zip Code  
30548-3486

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AD71EF91B0F7F4B0CBC1**

Amount of Each Receipt this Period

87.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SLAVIK, JOHN, H, ,**

Mailing Address 510 E ALEXANDER PALM RD

City  
BOCA RATON

State  
FL

Zip Code  
33432-7985

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A1F2237DB9923488CBFD**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SLAVIK, JOHN, H, ,

Mailing Address 510 E ALEXANDER PALM RD

City  
BOCA RATONState  
FLZip Code  
33432-7985FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A9533CDDC1A8E40B7AA1

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A6BB94FA5717B4FDBB59

Amount of Each Receipt this Period

1225.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITLOCK, GLORIA, S, ,

Mailing Address 605 WINDSOR DR

City  
BIRMINGHAMState  
ALZip Code  
35209-4433FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JEFFCOAT MECHANICALOccupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 26  | 2021    |

Transaction ID : A61AEF99E5E7246AB8F6

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINSHALL, JOANN, C, ,**

Mailing Address 5040 SW 9TH LN

City  
GAINESVILLE

State  
FL

Zip Code  
32607-3866

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE (RETIRED)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05 / 26 / 2021**

**Transaction ID : A753B991089A04621A9E**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PORTRA, DENNIS, , ,**

Mailing Address 104 BORCHARDT AVE

City  
UNDERWOOD

State  
ND

Zip Code  
58576-4009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
COAL CREEK CONSTRUCTION INC

Occupation (for Individual)  
SMALL BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 26 / 2021**

**Transaction ID : A830D47CB53EC44EABAA**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEMMERMANN, SHERRI, , ,**

Mailing Address PO BOX 32837

City  
SAINT LOUIS

State  
MO

Zip Code  
63132-8837

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE GATESWORTH

Occupation (for Individual)  
CNA/CAREGIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A8DD5BEB8FDDDD4F6B90E**

Amount of Each Receipt this Period

5.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCAPES, RICHARD, H, ,**

Mailing Address 27224 MEADOWBROOK DR

City  
EL MACERO

State  
CA

Zip Code  
95618-5049

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2021

Transaction ID : A1AF914E45C124553A34

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARVEY, WILLIAM, T, ,**

Mailing Address 136 ASPEN DR

City  
MADISON

State  
MS

Zip Code  
39110-9712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2021

Transaction ID : A0A3BD8EED9A4FA6AA6

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIOTKE, ROBERT, , ,**

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2021

Transaction ID : AF9085360215847498D9

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTONState  
ORZip Code  
97838-2663FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 24    |   | 2021        |

Transaction ID : AA6498287C5924E73BA8

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 24    |   | 2021        |

Transaction ID : A5F6BF302732449029C4

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNIONState  
NJZip Code  
07083-7427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.04

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 24    |   | 2021        |

Transaction ID : A249FDC79590A4EACBAA

Amount of Each Receipt this Period

5.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.04

Date of Receipt

**05 / 24 / 2021**

**Transaction ID : AD238285BDFD841ECB7A**

Amount of Each Receipt this Period

7.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.04

Date of Receipt

**05 / 24 / 2021**

**Transaction ID : A7A73F61D427347D8AC5**

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.04

Date of Receipt

**05 / 24 / 2021**

**Transaction ID : A6CFFC5EBCD1F4B98BD5**

Amount of Each Receipt this Period

2.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. SLEPIAN, LINDA, J, ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 328 SCOTTSDALE DR<br>City TROY State MI Zip Code 48084-1721<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1042.50             |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : A14201E4BFDDF4353884</b><br>Amount of Each Receipt this Period<br>50.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>B. FRIDRICH, HEINZ, K, ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 131 LONG POINT DR<br>City FERNANDINA BEACH State FL Zip Code 32034-6410<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 592.50 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : AD41CB99C05584C879B8</b><br>Amount of Each Receipt this Period<br>17.50<br><input checked="" type="checkbox"/> Memo Item |
| <b>C. TAFT, NANCY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 22377 CONCORD STREET<br>City SOUTHFIELD State MI Zip Code 48076<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5450.00             |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : A3BACE91DB7824254B6E</b><br>Amount of Each Receipt this Period<br>50.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  | 0.00                                                                                                                                                                                                         |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |                                                                                                                                                                                                              |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : AD2A0170188C34C9EB17**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A154CF07A337E429EAAA**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A87C0E120A96C4E3CB78**

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A0AE9E1E150AE481D869

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : ABB3224134BC540FE97D

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : AD0E1D4C707A44415A03

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |                                                                                                                                                                                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. TAFT, NANCY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 22377 CONCORD STREET<br>City SOUTHFIELD State MI Zip Code 48076<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5450.00            |  |  | Date of Receipt<br><input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2021"/><br><b>Transaction ID : A10409F89794B429FB23</b><br>Amount of Each Receipt this Period<br><input type="text" value="25.00"/><br><input checked="" type="checkbox"/> Memo Item |
| <b>B. TIERNEY, MATTHEW, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 401 RED CEDAR CT<br>City NASHVILLE State TN Zip Code 37214-4023<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00        |  |  | Date of Receipt<br><input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2021"/><br><b>Transaction ID : A2E3DC6E1647D47DB8A6</b><br>Amount of Each Receipt this Period<br><input type="text" value="17.50"/><br><input checked="" type="checkbox"/> Memo Item |
| <b>C. WESTERHOLD, STEVE, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 3257 ESPLANADE CIR SE<br>City RIO RANCHO State NM Zip Code 87124-7621<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 402.50 |  |  | Date of Receipt<br><input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2021"/><br><b>Transaction ID : A9B06FEA0C5A443DEB4C</b><br>Amount of Each Receipt this Period<br><input type="text" value="12.50"/><br><input checked="" type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  | <input type="text" value="0.00"/>                                                                                                                                                                                                                                                                     |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  | <input type="text"/>                                                                                                                                                                                                                                                                                  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDGEComb, GINA, , ,**

Mailing Address 7648 PEPPERTREE RD

City  
DUBLIN

State  
CA

Zip Code  
94568-2244

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A99BE62B70D1947138F8**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTS, GARY, , ,**

Mailing Address 1328 LONGSHORE LN

City

LAKE HAVASU CITY

State

AZ

Zip Code

86404-5999

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : AC151561FE1304594895**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARVEY, WILLIAM, T, ,**

Mailing Address 136 ASPEN DR

City

MADISON

State

MS

Zip Code

39110-9712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

770.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A599A2A58EC2049E69E1**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16            | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUHLESTEIN, RALPH, , ,**

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A3C171E44A7994B23A61**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State  
NM

Zip Code  
87124-7621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

**05 / 26 / 2021**

**Transaction ID : A5E002591CDE14D7691D**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REVILEE, CLYDE, , ,**

Mailing Address 10834 GRAND FORK DR

City

SANTEE

State  
CA

Zip Code  
92071-1934

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05 / 26 / 2021**

**Transaction ID : AC5433E7E6C4D45E7AE3**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. POTTER, MAC, , ,**

Mailing Address 2411 FARGO WAY

City  
SPARKS

State  
NV

Zip Code  
89434-0755

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NCH, LLC

Occupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A33BC81C30AAD4317BC1**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : A724C417E8CD44113831**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BRITTON, BEATRICE, T, ,**

Mailing Address PO BOX 2327

City  
S HAMILTON

State  
MA

Zip Code  
01982-0327

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**06** / **11** / **2021**

**Transaction ID : AF73C8C6162524516994**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, MARK, J, ,

Mailing Address 313 NOTTINGHAM RD

City  
WEST DEPTFORD

State  
NJ

Zip Code  
08096-3155

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 11 / 2021

Transaction ID : A7474CF9128B94D599B1

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BETTIS, HARRY, , MR.,

Mailing Address PO BOX 7

City  
EMMETT

State  
ID

Zip Code  
83617-0007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLACK CANYON PARTNERS LLC

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 11 / 2021

Transaction ID : A7D01B43D53AE4F86A1A

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BYERS, ALBERT, G, ,

Mailing Address PO BOX 610

City  
RCHO SANTA FE

State  
CA

Zip Code  
92067-0610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 11 / 2021

Transaction ID : A6BC1119318304C11AFD

Amount of Each Receipt this Period

150.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECKERT, TERESA, , ,**

Mailing Address 9518 220TH ST SW

City  
EDMONDS

State  
WA

Zip Code  
98020-4556

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**06 / 11 / 2021**

**Transaction ID : A67E6B24FD3B2428D89F**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VITENSON, JEROME, , ,**

Mailing Address 389 PACIFIC AVE

City  
PACIFICA

State  
CA

Zip Code  
94044-2623

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**06 / 14 / 2021**

**Transaction ID : A3A63778925F44CBA73**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRUMPACKER, JIM, J, ,**

Mailing Address 37959 S DESERT HIGHLAND DR

City  
TUCSON

State  
AZ

Zip Code  
85739-1719

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**06 / 11 / 2021**

**Transaction ID : A96CEDE2E9CC54E6CBA1**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUGHES, WILLIAM, , ,

Mailing Address 920 VIA NOGALES

City  
PALOS VERDES ESTATESState  
CAZip Code  
90274-1623FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 11  | 2021    |

Transaction ID : A35616E74E4494642BEB

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DE JONG, ARIE, ERIC, ,

Mailing Address 807 E MISSION RD

City  
SAN MARCOSState  
CAZip Code  
92069-3002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 11  | 2021    |

Transaction ID : A73FD0DDF073147FF831

Amount of Each Receipt this Period

1350.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A60016EADAEEC4B30BDA

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 211 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REED, YU-HSUAN, L, ,**

Mailing Address 681 SW WATERLOO AVE

City  
OAK HARBORState  
WAZip Code  
98277-8179FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 05  | 13  | 2021        |

Transaction ID : A8879A8DBD51C442A916

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RATEKIN, ANTHONY, , ,**

Mailing Address 305 HIGH SIERRA DR

City  
EXETERState  
CAZip Code  
93221-9505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTERN AG AND TURFOccupation (for Individual)  
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 05  | 11  | 2021        |

Transaction ID : AC82ACBD6722B41FD86C

Amount of Each Receipt this Period

1450.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

435.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 27  | 2021        |

Transaction ID : A0FFC6199C93D4AACA0D

Amount of Each Receipt this Period

20.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2021

Transaction ID : AF36D1F8FD4674049BB6

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2021

Transaction ID : A78534FBDD43E410ABB3

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

Transaction ID : A998DC6356A72429EA16

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RODGERS, STEVE, A, ,

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AD88130182A934B4E990

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REVILEE, CLYDE, , ,

Mailing Address 10834 GRAND FORK DR

City  
SANTEEState  
CAZip Code  
92071-1934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AB48E5092F53B4BFAA19

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REVILEE, CLYDE, , ,

Mailing Address 10834 GRAND FORK DR

City  
SANTEEState  
CAZip Code  
92071-1934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A5E5F7452BEE346E1853

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBERTS, GARY, , ,

Mailing Address 1328 LONGSHORE LN

City  
LAKE HAVASU CITYState  
AZZip Code  
86404-5999FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : A86739AE289194A4986E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICKETTS, MARILYN, , ,

Mailing Address 13773 CHARISMATIC WAY

City  
GAINESVILLEState  
VAZip Code  
20155-3119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A59B3710EF82D4CF7B1F

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHARDS, MARY, , ,

Mailing Address 330 6TH ST S

City  
NAPLESState  
FLZip Code  
34102-6349FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A8175AEF0065447FD868

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REED, THOMAS, , ,**

Mailing Address PO BOX 1448

City  
HEALDSBURGState  
CAZip Code  
95448-1448FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A1451CB6EF9CC4D8D867

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEYState  
AZZip Code  
85614-4732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AA9DBB191923C4E71A64

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEYState  
AZZip Code  
85614-4732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1095.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AA75722AE386F4405A03

Amount of Each Receipt this Period

10.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A0BA83102DAB34D29B1C

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : AA2E6FFE45ADE4A4AAAE

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A29980E65A20241FFB63

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RODGERS, STEVE, A, ,

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A464A0367D92B48FE92D

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RODGERS, STEVE, A, ,

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A329F9D438EDF47F992B

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RODGERS, STEVE, A, ,

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

910.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AD4707861722A4933B8A

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : AFF387E37E87D4A54A80**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : AC4C15E471DA0446C819**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

985.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A06E1E0D98466476C816**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

**05** / **26** / **2021**

**Transaction ID : A3CE5A3E919D94C11B1B**

Amount of Each Receipt this Period

30.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICE, DIANNE, T, ,**

Mailing Address 4807 APALACHEE ST

City

JACKSONVILLE

State

FL

Zip Code

32210-8328

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **26** / **2021**

**Transaction ID : AEC89F666DB0043118A6**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City

VISALIA

State

CA

Zip Code

93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : ABEDDE7D9E9074A29A0A**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 220 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSS, LEIGH, A, ,**

Mailing Address 4021 MORNING STAR DR

City  
HUNTINGTON BEACHState  
CAZip Code  
92649-3009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

**Transaction ID : A8BE7C675F7224BFB828**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSS, RONALD, D, ,**

Mailing Address 1320 S GATEWAY BLVD

City  
RIDGECRESTState  
CAZip Code  
93555-8172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

**Transaction ID : AF24650676F20451FA4E**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROSS, RONALD, D, ,**

Mailing Address 1320 S GATEWAY BLVD

City  
RIDGECRESTState  
CAZip Code  
93555-8172FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

**Transaction ID : A5F216212048B43F79A9**

Amount of Each Receipt this Period

17.50

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |                                                                                                                                                                                                                         |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. ROSS, RONALD, D, ,</b></p> <p>Mailing Address <b>1320 S GATEWAY BLVD</b></p> <p>City <b>RIDGECREST</b> State <b>CA</b> Zip Code <b>93555-8172</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/><b>217.50</b></p>  |  |  | <p>Date of Receipt<br/> <b>05 / 25 / 2021</b><br/> <b>Transaction ID : A232A4546B2B8475A913</b> </p> <p>Amount of Each Receipt this Period<br/> <b>17.50</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p>  |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. ROSS, RONALD, D, ,</b></p> <p>Mailing Address <b>1320 S GATEWAY BLVD</b></p> <p>City <b>RIDGECREST</b> State <b>CA</b> Zip Code <b>93555-8172</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RETIRED</b> Occupation (for Individual) <b>RETIRED</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/><b>242.50</b></p>  |  |  | <p>Date of Receipt<br/> <b>05 / 26 / 2021</b><br/> <b>Transaction ID : AF01C27B5071F4B8E9B6</b> </p> <p>Amount of Each Receipt this Period<br/> <b>25.00</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p>  |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. RUTKOWSKI, HELENA, , ,</b></p> <p>Mailing Address <b>200 DEER RUN</b></p> <p>City <b>BURLINGTON</b> State <b>CT</b> Zip Code <b>06013-1837</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>RUTKOWSKI PAINT</b> Occupation (for Individual) <b>OWNER</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼<br/><b>500.00</b></p> |  |  | <p>Date of Receipt<br/> <b>05 / 20 / 2021</b><br/> <b>Transaction ID : ABCDE7E001F9048D2835</b> </p> <p>Amount of Each Receipt this Period<br/> <b>250.00</b> </p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  | <p><b>0.00</b></p>                                                                                                                                                                                                      |  |
| <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |                                                                                                                                                                                                                         |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : AEE8A0241B892473C86C**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. FOWLER, RANDALL, , ,**

Mailing Address 507 PRINCE ALBERT ST SE

City  
KENTWOOD

State  
MI

Zip Code  
49548-7648

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
MAIL HANDLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **27** / **2021**

**Transaction ID : ACD3CB0318BCF4906A7E**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. FIRCHAU, ALBERT, H., ,**

Mailing Address 390 HAUSER BLVD  
APT 4F

City  
LOS ANGELES

State  
CA

Zip Code  
90036-5574

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**04** / **27** / **2021**

**Transaction ID : A91295B54677D42E6927**

Amount of Each Receipt this Period

175.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARRIOTT, DAVID, K, ,**

Mailing Address 19411 ADKINS FOREST DR

City  
SPRING

State  
TX

Zip Code  
77379-3026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2021

**Transaction ID : A6DBEDB04AEA94600A9C**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City

FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : A409C3DD6970142F78C8**

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City

FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : A48CFAD2DFD1D437C825**

Amount of Each Receipt this Period

20.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : A6ABEE39F7915410A8B6**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : ACD3347927086449D974**

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 11 / 2021

**Transaction ID : A674B0515E08C4767901**

Amount of Each Receipt this Period

17.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 225 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A2003E7C44DC74F12B4C**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A5CF96E811E4A47DFB2E**

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.50

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : A62C79D786B294749B4E**

Amount of Each Receipt this Period

17.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A77850CA58ED74949A62

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : AAF072791837544BFB6D

Amount of Each Receipt this Period

40.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : AFA282D08302442F4A7B

Amount of Each Receipt this Period

10.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL 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 PageFOR LINE NUMBER: PAGE 227 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

**Transaction ID : A805E96575B804512A7D**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

**Transaction ID : A7D369BBAE58748AD96C**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACHState  
FLZip Code  
32034-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

**Transaction ID : A967C1CBB675145809F9**

Amount of Each Receipt this Period

15.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIDRICH, HEINZ, K, ,

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : AA48CEB9653DB44929F9

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIDRICH, HEINZ, K, ,

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A507E0BAECEF864EA897B

Amount of Each Receipt this Period

40.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIDRICH, HEINZ, K, ,

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2021

Transaction ID : A8E963100D1F2425E926

Amount of Each Receipt this Period

17.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A45CDC837EE0C4BB580D**

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A3E960F41B4AF4C9682C**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

592.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A8B993046C95E4E5F8C7**

Amount of Each Receipt this Period

17.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                        |                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. FRIDRICH, HEINZ, K, ,</b>              |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : AC983BBCE7E754EDEA4E</b> |  |
| Mailing Address 131 LONG POINT DR                                                                                               |             |                                        | Amount of Each Receipt this Period<br>25.00                                                                |  |
| City<br>FERNANDINA BEACH                                                                                                        | State<br>FL | Zip Code<br>32034-6410                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>592.50     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. FRIDRICH, HEINZ, K, ,</b>              |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : A254DF098239D481FBC9</b> |  |
| Mailing Address 131 LONG POINT DR                                                                                               |             |                                        | Amount of Each Receipt this Period<br>15.00                                                                |  |
| City<br>FERNANDINA BEACH                                                                                                        | State<br>FL | Zip Code<br>32034-6410                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>592.50     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. FRISBIE, STEVEN, , ,</b>               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : A5E8C61F6A85E4E67BDE</b> |  |
| Mailing Address PO BOX 698                                                                                                      |             |                                        | Amount of Each Receipt this Period<br>50.00                                                                |  |
| City<br>CADILLAC                                                                                                                | State<br>MI | Zip Code<br>49601-0698                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>300.00     |                                                                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                            |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A8014D751034E49F089F**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : A083FA8ED21E347FF85E**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELEEuw, DAVID, E, ,**

Mailing Address 1130 PARK AVE  
APT 12

City  
NEW YORK

State  
NY

Zip Code  
10128-1255

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
LION CAO ASSET MANAGEMENT, LLC

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**04** / **27** / **2021**

**Transaction ID : AE6E51EC2D8384C75A52**

Amount of Each Receipt this Period

300.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |                    |                                                        |                                                                     |  |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------|---------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. DOBSKI, ROBERT, , ,</b>                |                    |                                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br><b>05 / 13 / 2021</b> |  |
| Mailing Address <b>1607 COMMERCE PKWY</b><br><b>STE A</b>                                                                       |                    |                                                        | <b>Transaction ID : A4B6CD8E2DE00447699D</b>                        |  |
| City<br><b>BLOOMINGTON</b>                                                                                                      | State<br><b>IL</b> | Zip Code<br><b>61704-9664</b>                          | Amount of Each Receipt this Period<br><b>250.00</b>                 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                          |                    |                                                        | <input checked="" type="checkbox"/> Memo Item                       |  |
| Name of Employer (for Individual)<br><b>R.J.JUEST INC</b>                                                                       |                    | Occupation (for Individual)<br><b>RESTAURANT OWNER</b> |                                                                     |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Aggregate Year-to-Date ▼<br><b>250.00</b>              |                                                                     |  |

|                                                                                                                                 |                    |                                                             |                                                                     |  |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------------------------|---------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. DELPH, ROGER, , ,</b>                  |                    |                                                             | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br><b>05 / 25 / 2021</b> |  |
| Mailing Address <b>7043 W PERSHING CT</b>                                                                                       |                    |                                                             | <b>Transaction ID : A446CD32FEAFFE499D8B1</b>                       |  |
| City<br><b>VISALIA</b>                                                                                                          | State<br><b>CA</b> | Zip Code<br><b>93291-7939</b>                               | Amount of Each Receipt this Period<br><b>125.00</b>                 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                          |                    |                                                             | <input checked="" type="checkbox"/> Memo Item                       |  |
| Name of Employer (for Individual)<br><b>RLMK INC</b>                                                                            |                    | Occupation (for Individual)<br><b>FRANCHISE OWNER - CEO</b> |                                                                     |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Aggregate Year-to-Date ▼<br><b>250.00</b>                   |                                                                     |  |

|                                                                                                                               |                    |                                               |                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------|---------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. DEMILLE, CECIL, B, ,</b>             |                    |                                               | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br><b>05 / 13 / 2021</b> |  |
| Mailing Address <b>3172 LUCINDA LN</b>                                                                                        |                    |                                               | <b>Transaction ID : A830FB6FE01C2441F865</b>                        |  |
| City<br><b>SANTA BARBARA</b>                                                                                                  | State<br><b>CA</b> | Zip Code<br><b>93105-2036</b>                 | Amount of Each Receipt this Period<br><b>250.00</b>                 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                        |                    |                                               | <input checked="" type="checkbox"/> Memo Item                       |  |
| Name of Employer (for Individual)<br><b>RETIRED</b>                                                                           |                    | Occupation (for Individual)<br><b>RETIRED</b> |                                                                     |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                    | Aggregate Year-to-Date ▼<br><b>250.00</b>     |                                                                     |  |

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**0.00**



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A2839FE8EA9894F40BEE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORRIE, M, MILLER, ,**

Mailing Address 54 COUNTRY CLUB BLVD

City

MOUNTAIN BRK

State  
ALZip Code  
35213-4228FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 27  | 2021    |

Transaction ID : A9B93DBFBD9B04D4D909

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GENKOS, MARY, , ,**

Mailing Address 1735 CLEVELAND RD

City

GLENDALE

State  
CAZip Code  
91202-1011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 26  | 2021    |

Transaction ID : ABE0C20B8DE754101889

Amount of Each Receipt this Period

150.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRABER, ERLENE, , ,**

Mailing Address N2615 RICHLAND RD

City  
MONROE

State  
WI

Zip Code  
53566-9434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GRABER WALT EXCAVATING LLC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 27 / 2021

**Transaction ID : AD58ED291A89C4967BF0**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOBBI, CATHERINE, , ,**

Mailing Address 1026 TODD RD

City  
SANTA ROSA

State  
CA

Zip Code  
95407-8021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED ATT

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 27 / 2021

**Transaction ID : AE3FB3CA87E12438A959**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.54

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : ABAC0B286A8C74B6BB1B**

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                        |                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. GINA, ALEXANDRA, J, ,</b>              |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 03 / 2021<br><b>Transaction ID : A36581F6A299C4CF5B7E</b> |  |
| Mailing Address 865 MIDLAND BLVD                                                                                                |             |                                        | Amount of Each Receipt this Period<br>5.00                                                                 |  |
| City<br>UNION                                                                                                                   | State<br>NJ | Zip Code<br>07083-7427                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>287.54     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. GINA, ALEXANDRA, J, ,</b>              |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 11 / 2021<br><b>Transaction ID : A2C0521D4F4BB4C7286E</b> |  |
| Mailing Address 865 MIDLAND BLVD                                                                                                |             |                                        | Amount of Each Receipt this Period<br>10.00                                                                |  |
| City<br>UNION                                                                                                                   | State<br>NJ | Zip Code<br>07083-7427                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>320.04     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. GINA, ALEXANDRA, J, ,</b>              |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 11 / 2021<br><b>Transaction ID : AFACBC6B21EE2422E968</b> |  |
| Mailing Address 865 MIDLAND BLVD                                                                                                |             |                                        | Amount of Each Receipt this Period<br>5.00                                                                 |  |
| City<br>UNION                                                                                                                   | State<br>NJ | Zip Code<br>07083-7427                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>320.04     |                                                                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                            |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.04

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : AE82DAA84337541B1B64**

Amount of Each Receipt this Period

7.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.04

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A465ED91068D943A1B6F**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOOCH, SHARON, L, ,**

Mailing Address PO BOX 722

City  
SUN CITY

State  
CA

Zip Code  
92586-0722

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A51010EB8AB6948AC80D**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOOCH, SHARON, L, ,

Mailing Address PO BOX 722

City  
SUN CITYState  
CAZip Code  
92586-0722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 11    |   | 2021        |

Transaction ID : A126A1F7BE4B94371815

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOOCH, SHARON, L, ,

Mailing Address PO BOX 722

City  
SUN CITYState  
CAZip Code  
92586-0722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 11    |   | 2021        |

Transaction ID : A916DB0B40263493EA84

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GINA, ALEXANDRA, J, ,

Mailing Address 865 MIDLAND BLVD

City  
UNIONState  
NJZip Code  
07083-7427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.04

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 18    |   | 2021        |

Transaction ID : A755876F885B34C53B45

Amount of Each Receipt this Period

10.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                        |                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. GINA, ALEXANDRA, J, ,</b>              |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : A9A7864868187481182E</b> |  |
| Mailing Address 865 MIDLAND BLVD                                                                                                |             |                                        | Amount of Each Receipt this Period<br>10.00                                                                |  |
| City<br>UNION                                                                                                                   | State<br>NJ | Zip Code<br>07083-7427                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>375.04     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. GINA, ALEXANDRA, J, ,</b>              |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : AC92FF42E683D4668B01</b> |  |
| Mailing Address 865 MIDLAND BLVD                                                                                                |             |                                        | Amount of Each Receipt this Period<br>10.00                                                                |  |
| City<br>UNION                                                                                                                   | State<br>NJ | Zip Code<br>07083-7427                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>375.04     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. GINA, ALEXANDRA, J, ,</b>              |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 25 / 2021<br><b>Transaction ID : AE79B52089D0945DFBC5</b> |  |
| Mailing Address 865 MIDLAND BLVD                                                                                                |             |                                        | Amount of Each Receipt this Period<br>5.00                                                                 |  |
| City<br>UNION                                                                                                                   | State<br>NJ | Zip Code<br>07083-7427                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>375.04     |                                                                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                            |  |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOOCH, SHARON, L, ,**

Mailing Address PO BOX 722

City  
SUN CITYState  
CAZip Code  
92586-0722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AA96FFA73B65D436E867

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOOCH, SHARON, L, ,**

Mailing Address PO BOX 722

City  
SUN CITYState  
CAZip Code  
92586-0722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : A2AD3EECAFBBE446D936

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A2EA95A901DED4D31892

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PORTER, MARILYN, B, ,

Mailing Address 2661 TALLANT RD  
APT MW516City  
SANTA BARBARAState  
CAZip Code  
93105-4807FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A78BDBDFA9ED7423DAAI

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAHAL, ROBERT, , ,

Mailing Address 1905 N BURLING ST

City  
CHICAGOState  
ILZip Code  
60614-5123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

Transaction ID : AEC639E89080B40E4878

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PORTRA, DENNIS, , ,

Mailing Address 104 BORCHARDT AVE

City  
UNDERWOODState  
NDZip Code  
58576-4009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COAL CREEK CONSTRUCTION INCOccupation (for Individual)  
SMALL BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A1A6A17D98ABA4A67B44

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |                                                                                                                                                                                                                |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. PRENDABLE, RUTH, L, ,</b></p> <p>Mailing Address 9508 UNDERWOOD ST</p> <p>City LANHAM SEABROOK State MD Zip Code 20706-3413</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/>250.00</p> |  |  | <p>Date of Receipt<br/> <b>05 / 13 / 2021</b><br/> <b>Transaction ID : A9E6E15159E0144B1B66</b> </p> <p>Amount of Each Receipt this Period<br/>250.00</p> <p><input checked="" type="checkbox"/> Memo Item</p> |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. RAK, HENRY, , ,</b></p> <p>Mailing Address 2 VILLAGE DR</p> <p>City TRUMBULL State CT Zip Code 06611-4800</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼<br/>300.00</p>                   |  |  | <p>Date of Receipt<br/> <b>05 / 03 / 2021</b><br/> <b>Transaction ID : A4D9F972866454DE3A1F</b> </p> <p>Amount of Each Receipt this Period<br/>25.00</p> <p><input checked="" type="checkbox"/> Memo Item</p>  |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. RAK, HENRY, , ,</b></p> <p>Mailing Address 2 VILLAGE DR</p> <p>City TRUMBULL State CT Zip Code 06611-4800</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼<br/>325.00</p>                     |  |  | <p>Date of Receipt<br/> <b>05 / 11 / 2021</b><br/> <b>Transaction ID : A2913BE3930F54C0CB96</b> </p> <p>Amount of Each Receipt this Period<br/>25.00</p> <p><input checked="" type="checkbox"/> Memo Item</p>  |  |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  | 0.00                                                                                                                                                                                                           |  |
| <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |                                                                                                                                                                                                                |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 242 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. RAK, HENRY, , ,**

Mailing Address 2 VILLAGE DR

City  
TRUMBULL

State  
CT

Zip Code  
06611-4800

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A4E7E0FE487C14EE490E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. RAK, HENRY, , ,**

Mailing Address 2 VILLAGE DR

City  
TRUMBULL

State  
CT

Zip Code  
06611-4800

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A197A45DB547847B1A67**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. RAK, HENRY, , ,**

Mailing Address 2 VILLAGE DR

City  
TRUMBULL

State  
CT

Zip Code  
06611-4800

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A52034187FFB0490DA6B**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 243 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PRESSEY, DON, , ,

Mailing Address 1250 YELLOWJACKET RD

City  
RENOState  
NVZip Code  
89521-7141FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 6 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A3E93E4DB2B4B427BBC6

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETERSON, DONALD, , ,

Mailing Address 17300 N 88TH AVE  
APT 154City  
PEORIAState  
AZZip Code  
85382-4794FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A5218BF856EE44251B09

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A1745721881644198B91

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 244 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. JOSEPH, DARYL, J, COL (RETIR,**

Mailing Address 615 PEACHTREE CT

City  
CAMPBELL

State  
CA

Zip Code  
95008-6353

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A51D92E223BE64795893**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. JOSEPH, DARYL, J, COL (RETIR,**

Mailing Address 615 PEACHTREE CT

City  
CAMPBELL

State  
CA

Zip Code  
95008-6353

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A767CEEF8DE604F8A9FD**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. JOSEPH, DARYL, J, COL (RETIR,**

Mailing Address 615 PEACHTREE CT

City  
CAMPBELL

State  
CA

Zip Code  
95008-6353

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AD0DBB926ED014478BAD**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : AD00A04A640FE406E901

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAJDU, NICHOLAS, A, ,**

Mailing Address 5906 CATINA ST

City  
NEW ORLEANSState  
LAZip Code  
70124-1908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A1B4F45A71F3A43488EC

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HANKS, J, DANIEL, DR., JR**

Mailing Address 39 HUNTINGTON RD SW

City  
ROMEState  
GAZip Code  
30165-6661FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : AC0D1B7DF19BD4569953

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANCHETT, MICHAEL, , ,**

Mailing Address 1164 HARTFORD ST

City  
CAMBRIA

State  
CA

Zip Code  
93428-2908

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CAVALIER INN

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : A86E34E16B4704B4EA2F**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROWNEY, THOMAS, F, ,**

Mailing Address 11100 LAGRIMA DE ORO RD NE  
APT 9412

City  
ALBUQUERQUE

State  
NM

Zip Code  
87111-6020

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TOM GROWNEY EQUIPMENT, INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : A5E96F88A07914BD09B3**

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARVEY, WILLIAM, T, ,**

Mailing Address 136 ASPEN DR

City  
MADISON

State  
MS

Zip Code  
39110-9712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

630.00

Date of Receipt

**05 / 03 / 2021**

**Transaction ID : AFFE007F08D04427C839**

Amount of Each Receipt this Period

20.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |                                                                                                                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>A. HAMILTON, EARL, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 105 WINTER FOREST DR<br>APT 102<br>City CANDLER State NC Zip Code 28715-0360<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 03 / 2021<br><b>Transaction ID : A809C982804CD4064BA9</b><br>Amount of Each Receipt this Period 50.00<br><input checked="" type="checkbox"/> Memo Item  |  |
| <b>B. HARVEY, WILLIAM, T, ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 136 ASPEN DR<br>City MADISON State MS Zip Code 39110-9712<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 655.00                  |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 11 / 2021<br><b>Transaction ID : A89D33B294B8F45DA81A</b><br>Amount of Each Receipt this Period 25.00<br><input checked="" type="checkbox"/> Memo Item  |  |
| <b>C. HASSOLDT, WILLIAM, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 10 PINE TREE LN<br>City ROLLING HILLS State CA Zip Code 90274-5012<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00        |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 11 / 2021<br><b>Transaction ID : A301A09A87B2F4AD29C9</b><br>Amount of Each Receipt this Period 250.00<br><input checked="" type="checkbox"/> Memo Item |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  | 0.00                                                                                                                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |                                                                                                                                                                                                            |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                                            |                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. HARVEY, WILLIAM, T, ,</b>              |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 13 / 2021</div> </div> |  |
| Mailing Address 136 ASPEN DR                                                                                                    |             |                                                            | Transaction ID : <b>AB0601231A21D47DCA58</b>                                               |  |
| City<br>MADISON                                                                                                                 | State<br>MS | Zip Code<br>39110-9712                                     | Amount of Each Receipt this Period<br><div> <div>15.00</div> </div>                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                                            |                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br><div> <div>670.00</div> </div> |                                                                                            |  |

☒ Memo Item

|                                                                                                                                 |             |                                                            |                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. HAMILTON, EARL, , ,</b>                |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 18 / 2021</div> </div> |  |
| Mailing Address 105 WINTER FOREST DR<br>APT 102                                                                                 |             |                                                            | Transaction ID : <b>A4998474026014FCAAF2</b>                                               |  |
| City<br>CANDLER                                                                                                                 | State<br>NC | Zip Code<br>28715-0360                                     | Amount of Each Receipt this Period<br><div> <div>25.00</div> </div>                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                                            |                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br><div> <div>390.00</div> </div> |                                                                                            |  |

☒ Memo Item

|                                                                                                                               |             |                                                            |                                                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. HAMILTON, EARL, , ,</b>              |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 18 / 2021</div> </div> |  |
| Mailing Address 105 WINTER FOREST DR<br>APT 102                                                                               |             |                                                            | Transaction ID : <b>AB1CBB9AA083D4441B3B</b>                                               |  |
| City<br>CANDLER                                                                                                               | State<br>NC | Zip Code<br>28715-0360                                     | Amount of Each Receipt this Period<br><div> <div>50.00</div> </div>                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                               |             |                                                            |                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                  |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Aggregate Year-to-Date ▼<br><div> <div>390.00</div> </div> |                                                                                            |  |

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 249 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARVEY, WILLIAM, T., ,**

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : A5C585A21C7894B86902

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HADDAD, ANGELO, A., ,**

Mailing Address 3815 STOCKDALE HWY

City  
BAKERSFIELDState  
CAZip Code  
93309-2156FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HADDAD ANGELOOccupation (for Individual)  
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A2F372621829D482C88C

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A471086C5B40F497FAEB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, DAN, J, ,**

Mailing Address 6318 WOODMAN DR

City  
OROVILLE

State  
CA

Zip Code  
95966-3844

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : A54D7D5E5D9A84B8CB85**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUGHAN, THELMA, , ,**

Mailing Address PO BOX 148

City  
HIGGINS

State  
TX

Zip Code  
79046-0148

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : A932544C3E95B45F7905**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CENTERS, ROBERT, E, ,**

Mailing Address 3410 MORNING GLORY RD

City  
DAYTON

State  
OH

Zip Code  
45449-3033

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : ADFD1A83702E645C0928**

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)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARMODY, MARGARET, M, ,

Mailing Address 16552 MONROE LN

City  
HUNTINGTON BEACHState  
CAZip Code  
92647-4821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : AE6B7772DE9E04C5BA25

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ENDRESEN, BARBARA, A, ,

Mailing Address 17047 ROSEBUD DR

City  
YORBA LINDAState  
CAZip Code  
92886-2233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE CENTER FOR INDIVIDUAL & FAMILY THEOccupation (for Individual)  
MARRIAGE/FAMILY THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A7A51C41B26074E9A829

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEALE, EDWIN, F, ,

Mailing Address 10 MCGIBNEY RD  
APT G3City  
MOUNT VERNONState  
OHZip Code  
43050-1240FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A26B34758E6D447BFA9F

Amount of Each Receipt this Period

125.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEALE, EDWIN, F, ,

Mailing Address 10 MCGIBNEY RD

APT G3

City  
MOUNT VERNONState  
OHZip Code  
43050-1240FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AF84958AC16694D58B75

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMENTZ, ERNST, , ,

Mailing Address 8500 SOUTHWIND BAY CIR

City  
FORT MYERSState  
FLZip Code  
33908-6029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CREATION GARDENSOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A561E58FFD241456880C

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A62BFBFF86FC04D45977

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAGAN, CLAIRE, , ,**

Mailing Address 408 WESSEX RD

City  
VALPARAISO

State  
IN

Zip Code  
46385-7716

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : AF746F175D92545A7936**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAGAN, CLAIRE, , ,**

Mailing Address 408 WESSEX RD

City  
VALPARAISO

State  
IN

Zip Code  
46385-7716

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : AE627E33B098945319C1**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLAND, KATHLEEN, , ,**

Mailing Address 3469 NEVA CIR

City  
NEWBURY PARK

State  
CA

Zip Code  
91320-4338

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : AAB9D006F644543E2994**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLETCHER, MARGUERITE, A, ,

Mailing Address 2968 SANCTUARY CIR

City  
LAKELANDState  
FLZip Code  
33803-5482FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AFD0FE8657B6C4CFDBFA

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRY, JOHN, B., ,

Mailing Address 1715 WAVERLAND DR

City  
MACONState  
GAZip Code  
31211-1119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EASTBANK TEXTILESOccupation (for Individual)  
TEXTILES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AD7A48447205F4223A5C

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLOWERS, DEAN, , ,

Mailing Address 352 W JORDAN AVE

City  
CLOVISState  
CAZip Code  
93611-7181FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A71475FB45C394C80997

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.54

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AF8514179C18543CEA36**

Amount of Each Receipt this Period

7.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNION

State  
NJ

Zip Code  
07083-7427

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.54

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AC8FE61817CC84B8E9E7**

Amount of Each Receipt this Period

7.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AE6E6CB4A4173460E97F**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A4DAD557B53AA43FB917

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A97355FEDBB5C46B1BA9

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AF8D3965741364330AB8

Amount of Each Receipt this Period

20.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : A3F77A520C74F43BE936

Amount of Each Receipt this Period

22.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE RD

City  
ARMONK

State  
NY

Zip Code  
10504-1324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : AF918F4FC4672400B983

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREITAS, JULIE, L, MRS.,**

Mailing Address 10888 19 1/2 AVE

City  
LEMOORE

State  
CA

Zip Code  
93245-9490

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DOUG & JULIE FREITAS FARM

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : AC98BB0C4E9BB4D628D8

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : A9F46925865DF4D2CB55**

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. TURNER, MARYJANE, , ,**

Mailing Address 50 GRAFTON ST

City  
NEWTON

State  
MA

Zip Code  
02459-1545

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AD76F3CB5AF07483B9B3**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. TRIBLE, JOHN, R, , II**

Mailing Address 1327 LAWSON LN

City  
MC LEAN

State  
VA

Zip Code  
22101-3639

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TRIBBLE'S, INC.

Occupation (for Individual)  
WHOLESALE-DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A0489F8A0FFB34865AAB**

Amount of Each Receipt this Period

75.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRIBLE, JOHN, R, , II**

Mailing Address 1327 LAWSON LN

City  
MC LEAN

State  
VA

Zip Code  
22101-3639

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TRIBLES, INC.

Occupation (for Individual)  
WHOLESALE-DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A170FE7CD951949139EE**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UTTER, ALYSON, , ,**

Mailing Address 3418 RIVERVIEW DR

City  
TAMPA

State  
FL

Zip Code  
33604-2315

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ANDERSON LESNIAK LTD

Occupation (for Individual)  
LANDSCAPE ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A5D3230BAEC4343E7B32**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TIERNEY, MATTHEW, , ,**

Mailing Address 401 RED CEDAR CT

City  
NASHVILLE

State  
TN

Zip Code  
37214-4023

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A835FB7D18C51423690A**

Amount of Each Receipt this Period

17.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                         |                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------|------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. TIERNEY, MATTHEW, , ,</b>              |             |                                         | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : AEB46BE24F8044B9FA13</b> |  |
| Mailing Address 401 RED CEDAR CT                                                                                                |             |                                         | Amount of Each Receipt this Period<br>17.50                                                                |  |
| City<br>NASHVILLE                                                                                                               | State<br>TN | Zip Code<br>37214-4023                  | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                         |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED  |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>210.00      |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. TIERNEY, MATTHEW, , ,</b>              |             |                                         | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A8DDE6D47CAE94FC3AC5</b> |  |
| Mailing Address 401 RED CEDAR CT                                                                                                |             |                                         | Amount of Each Receipt this Period<br>17.50                                                                |  |
| City<br>NASHVILLE                                                                                                               | State<br>TN | Zip Code<br>37214-4023                  | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                         |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED  |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>210.00      |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. VAN PELT, JASON, , ,</b>               |             |                                         | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A06A31757A4BF4149B00</b> |  |
| Mailing Address 800 N CAPITOL ST NW<br>STE 800                                                                                  |             |                                         | Amount of Each Receipt this Period<br>250.00                                                               |  |
| City<br>WASHINGTON                                                                                                              | State<br>DC | Zip Code<br>20002-4398                  | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                         |                                                                                                            |  |
| Name of Employer (for Individual)<br>CROSSROADS STRATEGIES                                                                      |             | Occupation (for Individual)<br>LOBBYIST |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>250.00      |                                                                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                         | 0.00                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                         |                                                                                                            |  |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TUREK, DAVID, , ,

Mailing Address 461 MAHANEY RD

City  
KING FERRY

State  
NY

Zip Code  
13081-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TUREK FARMS MANAGEMENT, INC

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AC8AAD1511AE8421CBEC

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TUREK, DAVID, , ,

Mailing Address 461 MAHANEY RD

City  
KING FERRY

State  
NY

Zip Code  
13081-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TUREK FARMS MANAGEMENT, INC

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A320143396AE54EF3B70

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUREK, DAVID, , ,

Mailing Address 461 MAHANEY RD

City  
KING FERRY

State  
NY

Zip Code  
13081-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TUREK FARMS MANAGEMENT, INC

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : ACBE2A644DF1C4BEEA0E

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 OF 426

(check only one)

|                              |                              |                              |                                                         |
|------------------------------|------------------------------|------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12                  |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C

C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A0F22F16FFF384CC49FE

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREGORY, SHIRLEY, A, MS.,**

Mailing Address 2812 ROMENCE RD

City  
PORTAGEState  
MIZip Code  
49024-7851FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A895B5656C66F467D8DF

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOLDBLATT, SIDNEY, , ,**

Mailing Address 1243 LAURELVIEW DR

City  
JOHNSTOWNState  
PAZip Code  
15905-1509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GOLDBLATT SYSTEMSOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A0A91212BFC7D4D3290A

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

500.00

TOTAL This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMMOCK, AMY, B, ,

Mailing Address 309 KINGSTON RD

City  
MYRTLE BEACHState  
SCZip Code  
29572-5348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : A21509833C5B442D1B90

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOES, CHARLES, B, , LV

Mailing Address 2201 S SHORE DR

City  
DELAVERState  
WIZip Code  
53115-3612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : AFA938586470E474A82F

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANDLEY, MARGARET, , ,

Mailing Address 1450 INGLESIDE AVE

City  
MCLEANState  
VAZip Code  
22101-3709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : AE11407839278487FB2E

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNIONState  
NJZip Code  
07083-7427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.54

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A4A0BDFFD61044A61862

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNIONState  
NJZip Code  
07083-7427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.54

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A2DD780AA416748B9B4B

Amount of Each Receipt this Period

15.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GINA, ALEXANDRA, J, ,**

Mailing Address 865 MIDLAND BLVD

City  
UNIONState  
NJZip Code  
07083-7427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

272.54

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A7E3F43D4C3B6496D88D

Amount of Each Receipt this Period

12.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 265 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |                                                                                                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. HAMILTON, EARL, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 105 WINTER FOREST DR<br>APT 102<br>City CANDLER State NC Zip Code 28715-0360<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00                      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A486A0877C85A485FBA3</b><br>Amount of Each Receipt this Period<br>50.00<br><input checked="" type="checkbox"/> Memo Item  |
| <b>B. HAMILTON, EARL, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 105 WINTER FOREST DR<br>APT 102<br>City CANDLER State NC Zip Code 28715-0360<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00                      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : AB64EBBC5D1C4442085E</b><br>Amount of Each Receipt this Period<br>25.00<br><input checked="" type="checkbox"/> Memo Item  |
| <b>C. HALL, GREGG, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 4150 CITRUS AVE<br>City ROCKLIN State CA Zip Code 95677-4000<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) TILTON PACIFIC CONSTRUCTION, INC. Occupation (for Individual) COMMERCIAL CONTRACTOR<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : AA2369DD628C14DF9BDC</b><br>Amount of Each Receipt this Period<br>250.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  | 0.00                                                                                                                                                                                                          |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |                                                                                                                                                                                                               |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARJU, LORI, , ,

Mailing Address 5913 MUNSON CT

City  
FALLS CHURCHState  
VAZip Code  
22041-2455FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROWNSTEIN HYATT FARBER SCHRECKOccupation (for Individual)  
POLICY DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y | Y | Y |
| 0 | 4 |  | 2 | 9 |  | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AEEA70459010E46EFA1E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y | Y | Y |
| 0 | 6 |  | 0 | 2 |  | 2 | 0 | 2 | 1 |   |   |

Transaction ID : ABED2A425A59046A498C

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BERTCH, MARY, H, ,

Mailing Address PO BOX 2759

City  
KIRKLANDState  
WAZip Code  
98083-2759FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y | Y | Y |
| 0 | 5 |  | 1 | 3 |  | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AAC1F827B95814E46B11

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 267 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRADY, LINDA, , ,

Mailing Address 4009 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0878FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : AF492A9EEF11D4C35AFE

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRADY, LINDA, , ,

Mailing Address 4009 109TH ST

City  
LUBBOCKState  
TXZip Code  
79423-0878FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : A273D733FD1AC4D5B8DB

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOURDET, SHAWN, G, ,

Mailing Address 10164 PACHECO PASS HWY

City  
HOLLISTERState  
CAZip Code  
95023-9504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PACHECO PASS LAND AND CATTLE LLCOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A08F72363DD174CC1BD4

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).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 268 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRENNAN, EDWARD, , ,**

Mailing Address 19669 GLEEDSVILLE RD

City  
LEESBURG

State  
VA

Zip Code  
20175-8848

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A116F3E3B9D004206BCC**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRENNAN, EDWARD, , ,**

Mailing Address 19669 GLEEDSVILLE RD

City  
LEESBURG

State  
VA

Zip Code  
20175-8848

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : AB3EA658A20194BD290B**

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRENNAN, EDWARD, , ,**

Mailing Address 19669 GLEEDSVILLE RD

City  
LEESBURG

State  
VA

Zip Code  
20175-8848

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A6C9FCCC0492C4701A41**

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOLDEROFF, DAVID, , ,**

Mailing Address 6122 N CHANNING CIR

City  
FRESNO

State  
CA

Zip Code  
93711-1806

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HARRIS FARMS

Occupation (for Individual)

SHOP AND EQUIPMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

**Transaction ID : A853F10DE3FBF4D71BEC**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOBZIN, PAUL, A, ,**

Mailing Address 3840 KESWICK RD

City

LA CANADA FLINTRIDGE

State

CA

Zip Code

91011-3945

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NONE - RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 26 / 2021

**Transaction ID : AF0B9B2DD9ADB40639C0**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOONE, PRISCILLA, , ,**

Mailing Address 4163 OAK PL DR

City

WESTLAKE VILLAGE

State

CA

Zip Code

91362-5129

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2021

**Transaction ID : AB1791C7B404242BD815**

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)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                             |                     |                                                                      |                                                                                                      |  |
|---------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--|
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>A. BHARATI, SAROJA, , ,</b></p>                   |                     |                                                                      | <p>Date of Receipt<br/> <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 11 / 2021</div> </div> </p> |  |
| <p>Mailing Address 950 N MICHIGAN AVE<br/>APT 5302</p>                                                                                      |                     |                                                                      | <p><b>Transaction ID : A77CFE3B717CB49D5A1B</b></p>                                                  |  |
| <p>City<br/>CHICAGO</p>                                                                                                                     | <p>State<br/>IL</p> | <p>Zip Code<br/>60611-7534</p>                                       | <p>Amount of Each Receipt this Period<br/> <div> <div>125.00</div> </div> </p>                       |  |
| <p>FEC ID number of contributing federal political committee.<br/> <div> <div>C</div> </div> </p>                                           |                     |                                                                      | <p><input checked="" type="checkbox"/> Memo Item</p>                                                 |  |
| <p>Name of Employer (for Individual)<br/>RETIRED</p>                                                                                        |                     | <p>Occupation (for Individual)<br/>RETIRED</p>                       |                                                                                                      |  |
| <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼ </p> |                     | <p>Aggregate Year-to-Date ▼<br/> <div> <div>425.00</div> </div> </p> |                                                                                                      |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>B. BLOXOM, JENNIFER, , ,</b></p>                  |                     |                                                                      | <p>Date of Receipt<br/> <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 11 / 2021</div> </div> </p> |  |
| <p>Mailing Address 20305 NE 38TH ST</p>                                                                                                     |                     |                                                                      | <p><b>Transaction ID : AFF389150B8E64C5F923</b></p>                                                  |  |
| <p>City<br/>SAMMAMISH</p>                                                                                                                   | <p>State<br/>WA</p> | <p>Zip Code<br/>98074-4312</p>                                       | <p>Amount of Each Receipt this Period<br/> <div> <div>25.00</div> </div> </p>                        |  |
| <p>FEC ID number of contributing federal political committee.<br/> <div> <div>C</div> </div> </p>                                           |                     |                                                                      | <p><input checked="" type="checkbox"/> Memo Item</p>                                                 |  |
| <p>Name of Employer (for Individual)<br/>RETIRED</p>                                                                                        |                     | <p>Occupation (for Individual)<br/>RETIRED</p>                       |                                                                                                      |  |
| <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼ </p> |                     | <p>Aggregate Year-to-Date ▼<br/> <div> <div>307.50</div> </div> </p> |                                                                                                      |  |
| <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br/><b>C. BLOXOM, JENNIFER, , ,</b></p>                  |                     |                                                                      | <p>Date of Receipt<br/> <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 11 / 2021</div> </div> </p> |  |
| <p>Mailing Address 20305 NE 38TH ST</p>                                                                                                     |                     |                                                                      | <p><b>Transaction ID : A5B7273B438BF41B6A4A</b></p>                                                  |  |
| <p>City<br/>SAMMAMISH</p>                                                                                                                   | <p>State<br/>WA</p> | <p>Zip Code<br/>98074-4312</p>                                       | <p>Amount of Each Receipt this Period<br/> <div> <div>10.00</div> </div> </p>                        |  |
| <p>FEC ID number of contributing federal political committee.<br/> <div> <div>C</div> </div> </p>                                           |                     |                                                                      | <p><input checked="" type="checkbox"/> Memo Item</p>                                                 |  |
| <p>Name of Employer (for Individual)<br/>RETIRED</p>                                                                                        |                     | <p>Occupation (for Individual)<br/>RETIRED</p>                       |                                                                                                      |  |
| <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) </p>   |                     | <p>Aggregate Year-to-Date ▼<br/> <div> <div>307.50</div> </div> </p> |                                                                                                      |  |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional).....▶</p>                                                                               |                     |                                                                      | <div> <div>0.00</div> </div>                                                                         |  |
| <p><b>TOTAL</b> This Period (last page this line number only).....▶</p>                                                                     |                     |                                                                      | <div> </div>                                                                                         |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 271 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                                            |                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. BLOXOM, JENNIFER, , ,</b>              |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 11 / 2021</div> </div> |  |
| Mailing Address 20305 NE 38TH ST                                                                                                |             |                                                            | <b>Transaction ID : ACF97C7A156744BB1B34</b>                                               |  |
| City<br>SAMMAMISH                                                                                                               | State<br>WA | Zip Code<br>98074-4312                                     | Amount of Each Receipt this Period<br><div> <div>25.00</div> </div>                        |  |
| FEC ID number of contributing federal political committee.<br><div> <div>C</div> </div>                                         |             |                                                            | <input checked="" type="checkbox"/> Memo Item                                              |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br><div> <div>307.50</div> </div> |                                                                                            |  |

|                                                                                                                                 |             |                                                            |                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. BLOXOM, JENNIFER, , ,</b>              |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 11 / 2021</div> </div> |  |
| Mailing Address 20305 NE 38TH ST                                                                                                |             |                                                            | <b>Transaction ID : A8D053A3F2AB64B4BB96</b>                                               |  |
| City<br>SAMMAMISH                                                                                                               | State<br>WA | Zip Code<br>98074-4312                                     | Amount of Each Receipt this Period<br><div> <div>12.50</div> </div>                        |  |
| FEC ID number of contributing federal political committee.<br><div> <div>C</div> </div>                                         |             |                                                            | <input checked="" type="checkbox"/> Memo Item                                              |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br><div> <div>307.50</div> </div> |                                                                                            |  |

|                                                                                                                               |             |                                                            |                                                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. BLOXOM, JENNIFER, , ,</b>            |             |                                                            | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 11 / 2021</div> </div> |  |
| Mailing Address 20305 NE 38TH ST                                                                                              |             |                                                            | <b>Transaction ID : AFAB9C5544F6C41E99EF</b>                                               |  |
| City<br>SAMMAMISH                                                                                                             | State<br>WA | Zip Code<br>98074-4312                                     | Amount of Each Receipt this Period<br><div> <div>25.00</div> </div>                        |  |
| FEC ID number of contributing federal political committee.<br><div> <div>C</div> </div>                                       |             |                                                            | <input checked="" type="checkbox"/> Memo Item                                              |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                  |             | Occupation (for Individual)<br>RETIRED                     |                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Aggregate Year-to-Date ▼<br><div> <div>307.50</div> </div> |                                                                                            |  |

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 272 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BINDEL, KATHERINE, , ,

Mailing Address 26085 ZDAN RD

City  
CARMEL VALLEYState  
CAZip Code  
93924-9240FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : AD98FC4F9CB2442E082F

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A4F7AD5FA31DC441980E

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KIEFER, JOHN, , ,

Mailing Address 12189 FOREST MEADOW DR

City  
DUBUQUEState  
IAZip Code  
52001-0102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A165857B26D4C4F0599C

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).....▶

1000.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 273 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KIRKWOOD, SUSAN, G, ,**

Mailing Address 6220 S WALNUT ST

City  
CASPER

State  
WY

Zip Code  
82601-6250

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**05** / **13** / **2021**

Transaction ID : **ADE64887F1FC54EC6A28**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KIDDER, CHRISTIANE, M, ,**

Mailing Address 5410 STORMY TRL

City

SAN ANTONIO

State

TX

Zip Code

78247-1850

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05** / **13** / **2021**

Transaction ID : **A62EAEF4BDF6D4A3BB47**

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. JOUTRAS, RICHARD, , ,**

Mailing Address 16711 LUCARNO WAY

City

NAPLES

State

FL

Zip Code

34110-3266

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **28** / **2021**

Transaction ID : **A9DBD4B498A664DF38B3**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KINSINGER, JAMES, R, ,**

Mailing Address 21380 WASHINGTON RD

City  
DEER CREEKState  
ILZip Code  
61733-9436FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 27    |   | 2021        |

Transaction ID : AEBB377B1FC0444D2A36

Amount of Each Receipt this Period

112.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KALAJIAN, GARY, , , JR.**

Mailing Address 7090 N BENGSTON AVE

City  
FRESNOState  
CAZip Code  
93711-7156FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
L & B KALAJIAN FARMS LLCOccupation (for Individual)  
PART OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 27    |   | 2021        |

Transaction ID : AC970AAD778CA43278F4

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KENNY, MAUREEN, , ,**

Mailing Address 4230 DOUGLASTON PKWY

City  
LITTLE NECKState  
NYZip Code  
11363-1538FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 11    |   | 2021        |

Transaction ID : ACD00903204964A7D854

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOSEPH, DARYL, J, COL (RETIR,

Mailing Address 615 PEACHTREE CT

City  
CAMPBELLState  
CAZip Code  
95008-6353FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : ADDC6D2BF26144D3CB72

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KLINE, CARL, , ,

Mailing Address 5226 HUMMINGBIRD ST

City  
HOUSTONState  
TXZip Code  
77035-3015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AE963DC9BF882493A8AD

Amount of Each Receipt this Period

37.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KLINE, CARL, , ,

Mailing Address 5226 HUMMINGBIRD ST

City  
HOUSTONState  
TXZip Code  
77035-3015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : ADBAE540BCC894BF6877

Amount of Each Receipt this Period

75.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAESGEN, DIETER, , ,**

Mailing Address 19460 FRAZIER DR

City  
ROCKY RIVERState  
OHZip Code  
44116-1727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 25    | / | 2021        |

**Transaction ID : A7810C27B73E1470F9A5**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KING, DAVID, , ,**

Mailing Address PO BOX 1537

City  
PATTERSONState  
CAZip Code  
95363-1537FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KINGS ROOFINGOccupation (for Individual)  
ROOFER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 27    | / | 2021        |

**Transaction ID : A1B825B806FEB432FB11**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KALJIAN, THOMAS, E, ,**

Mailing Address 645 PACHECO BLVD

City  
LOS BANOSState  
CAZip Code  
93635-4231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
REALESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 04    | / | 2021        |

**Transaction ID : AA76B391B174E47A5815**

Amount of Each Receipt this Period

270.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. NUNES VICTORY FUND</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address PO BOX 6545<br>City VISALIA State CA Zip Code 93290<br>FEC ID number of contributing federal political committee. <b>C</b> C00544031<br>Name of Employer (for Individual) Occupation (for Individual)<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 182432.00                       |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 02 / 2021<br><b>Transaction ID : AF297FE4125E0493EB18</b><br>Amount of Each Receipt this Period<br>1000.00<br><input type="checkbox"/> Memo Item<br>TRANSFER FROM JFC |
| <b>B. MALMBERG, LARRY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 1000 S HIGHWAY 395<br>City HERMISTON State OR Zip Code 97838-2663<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) Occupation (for Individual)<br>RETIRED RETIRED<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 03 / 2021<br><b>Transaction ID : AA689E0D08B924F61AFE</b><br>Amount of Each Receipt this Period<br>10.00<br><input checked="" type="checkbox"/> Memo Item             |
| <b>C. MALMBERG, LARRY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 1000 S HIGHWAY 395<br>City HERMISTON State OR Zip Code 97838-2663<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) Occupation (for Individual)<br>RETIRED RETIRED<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼ 270.00   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 03 / 2021<br><b>Transaction ID : A98CEADE5CFEE48E2A1D</b><br>Amount of Each Receipt this Period<br>25.00<br><input checked="" type="checkbox"/> Memo Item             |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | 1000.00                                                                                                                                                                                                                  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                          |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTONState  
ORZip Code  
97838-2663FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

Transaction ID : AB6213849CED5460D91A

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTONState  
ORZip Code  
97838-2663FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : AB41430D4898B468BA62

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTONState  
ORZip Code  
97838-2663FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

292.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : A80E3185B5DC44F109FB

Amount of Each Receipt this Period

12.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MA, ROBERT, , ,**

Mailing Address 23018 58TH RD

City  
BAYSIDEState  
NYZip Code  
11364-2437FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A10EEE801019F4808B59

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTONState  
ORZip Code  
97838-2663FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : AEFACCE08E9994F68AD5

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTONState  
ORZip Code  
97838-2663FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

317.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A9E198CE9CE554A1DA4C

Amount of Each Receipt this Period

12.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTON

State  
OR

Zip Code  
97838-2663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A737191B8D29447539AA**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTON

State  
OR

Zip Code  
97838-2663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : AAC73CDF76CF54D18BE2**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTON

State  
OR

Zip Code  
97838-2663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : ACC85683B55B14FD29EE**

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MALMBERG, LARRY, , ,

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTONState  
ORZip Code  
97838-2663FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 25    | / | 2021        |

Transaction ID : AEDD227AD73D142298EF

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LINDENBAUM, ELEANOR, , ,

Mailing Address 418 PASEO MIRAMAR

City  
REDONDO BEACHState  
CAZip Code  
90277-6287FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETOccupation (for Individual)  
RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 27    | / | 2021        |

Transaction ID : A76FA76A170564E28916

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACLEOD, DOUGLAS, J, ,

Mailing Address 12800 VONN RD  
APT 9802City  
LARGOState  
FLZip Code  
33774-6506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 13    | / | 2021        |

Transaction ID : A7300B6B74E3445C9AA5

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. NUNES VICTORY FUND</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address PO BOX 6545<br>City VISALIA State CA Zip Code 93290<br>FEC ID number of contributing federal political committee. <b>C</b> C00544031<br>Name of Employer (for Individual) Occupation (for Individual)<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 182432.00                   |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 02 / 2021<br><b>Transaction ID : A0DC42093D22F40BDA32</b><br>Amount of Each Receipt this Period<br>1000.00<br><input type="checkbox"/> Memo Item<br>TRANSFER FROM JFC |
| <b>B. JOHNSON, MARY ALICE, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address PO BOX 168<br>City PIEDMONT State SD Zip Code 57769-0168<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00     |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 04 / 2021<br><b>Transaction ID : AC5C7C6C7D658415AA18</b><br>Amount of Each Receipt this Period<br>5.00<br><input checked="" type="checkbox"/> Memo Item              |
| <b>C. DUCATO, GILBERT, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 1530 WINBERIE CT<br>City NAPERVILLE State IL Zip Code 60564-9746<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 04 / 2021<br><b>Transaction ID : A38F88C9348DA41AF9E7</b><br>Amount of Each Receipt this Period<br>500.00<br><input checked="" type="checkbox"/> Memo Item            |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  | 1000.00                                                                                                                                                                                                                  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |                                                                                                                                                                                                                          |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 283 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. NUNES VICTORY FUND</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address PO BOX 6545<br>City VISALIA State CA Zip Code 93290<br>FEC ID number of contributing federal political committee. <b>C</b> C00544031<br>Name of Employer (for Individual) Occupation (for Individual)<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 182432.00                       |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 02 / 2021<br><b>Transaction ID : A673C270B6FE34D2D88E</b><br>Amount of Each Receipt this Period<br>1000.00<br><input type="checkbox"/> Memo Item<br>TRANSFER FROM JFC |
| <b>B. KIDDER, CHRISTIANE, M, ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 5410 STORMY TRL<br>City SAN ANTONIO State TX Zip Code 78247-1850<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2021<br><b>Transaction ID : A08845202DD814090950</b><br>Amount of Each Receipt this Period<br>75.00<br><input checked="" type="checkbox"/> Memo Item             |
| <b>C. MCDONALD, JUDY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 2525 FOX RUN RD SW APT 9<br>City WYOMING State MI Zip Code 49519-4116<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2021<br><b>Transaction ID : A0CE4BEE004B14E799BD</b><br>Amount of Each Receipt this Period<br>100.00<br><input checked="" type="checkbox"/> Memo Item            |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 1000.00                                                                                                                                                                                                                  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                          |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 284 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANIFOLD, JOHN, , ,

Mailing Address 31520 US HIGHWAY 12

APT 1

City  
STURGISState  
MIZip Code  
49091-8431FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : AEE2550B32D5D4E7D945

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANDRETH, SUSAN, , ,

Mailing Address 2600 AVENIDA AEROPURTO SPC 96

City

SAN JUAN CAPISTRANO

State  
CAZip Code  
92675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A8CAA53467CEA43B5936

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KLEINBUB, FREDRICK, , ,

Mailing Address 6211 CAMINO DE LA COSTA

City

LA JOLLA

State  
CAZip Code  
92037-6523FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : AD225CF2B0EB2460B89E

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANTEUFFEL, ALLAN, D, ,

Mailing Address 1440 CHAMPION FOREST CT

City  
WHEATONState  
ILZip Code  
60187-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A4D95ED85597F4EF095D

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KINSINGER, JAMES, R, ,

Mailing Address 21380 WASHINGTON RD

City  
DEER CREEKState  
ILZip Code  
61733-9436FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : ABBB09761227B4DCE963

Amount of Each Receipt this Period

112.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIKITAW, FRANK, , ,

Mailing Address 7714 E PARKSIDE DR

City  
YOUNGSTOWNState  
OHZip Code  
44512-5310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AD3709D4C032E4FAB9D2

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                        |                                                                                                                    |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. MCINERNEY, REGINA, , ,</b>             |             |                                        | Date of Receipt<br>M = M / D = D / Y = Y - Y - Y<br>06 / 01 / 2021<br><b>Transaction ID : AC8164919225E428EB07</b> |  |
| Mailing Address PO BOX 1128                                                                                                     |             |                                        | Amount of Each Receipt this Period<br>10.00                                                                        |  |
| City<br>INDIAN SPRINGS                                                                                                          | State<br>NV | Zip Code<br>89018-1128                 | <input checked="" type="checkbox"/> Memo Item                                                                      |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                                    |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>210.00     |                                                                                                                    |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. KAESGEN, DIETER, , ,</b>               |             |                                        | Date of Receipt<br>M = M / D = D / Y = Y - Y - Y<br>06 / 01 / 2021<br><b>Transaction ID : A6CA53962FC0C49A3BEA</b> |  |
| Mailing Address 19460 FRAZIER DR                                                                                                |             |                                        | Amount of Each Receipt this Period<br>125.00                                                                       |  |
| City<br>ROCKY RIVER                                                                                                             | State<br>OH | Zip Code<br>44116-1727                 | <input checked="" type="checkbox"/> Memo Item                                                                      |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                                    |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>512.50     |                                                                                                                    |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. KRENZ, JULIE, A, ,</b>                 |             |                                        | Date of Receipt<br>M = M / D = D / Y = Y - Y - Y<br>06 / 01 / 2021<br><b>Transaction ID : A43C0710189F54C2986E</b> |  |
| Mailing Address 87 BROAD COVE DR                                                                                                |             |                                        | Amount of Each Receipt this Period<br>100.00                                                                       |  |
| City<br>MONTGOMERY                                                                                                              | State<br>TX | Zip Code<br>77356-8311                 | <input checked="" type="checkbox"/> Memo Item                                                                      |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                                    |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>225.00     |                                                                                                                    |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                               |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                                    |  |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUGIES, CHO-YOUNG, , ,

Mailing Address 2820 BENSON WAY

City  
BELMONT

State  
CA

Zip Code  
94002-2939

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2021

Transaction ID : AD297013401CB4C329EA

Amount of Each Receipt this Period

80.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2021

Transaction ID : AFE337462F3914C29830

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, MARY, L, ,

Mailing Address PO BOX 269

City  
SALUDA

State  
VA

Zip Code  
23149-0269

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1037.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2021

Transaction ID : A1200738674BB4CAA1C

Amount of Each Receipt this Period

375.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |                                                                                                                                                                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. SARUWATARI, LORENE, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 512 LAUNA LN<br>City ARROYO GRANDE State CA Zip Code 93420-3428<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2021<br><b>Transaction ID : AA4F69055524F49739FE</b><br>Amount of Each Receipt this Period<br>100.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>B. REDDY, VARADAREDDY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 613 GOLDER AVE<br>City ODESSA State TX Zip Code 79761-4412<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2021<br><b>Transaction ID : A096208D94DE04272AE7</b><br>Amount of Each Receipt this Period<br>125.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>C. ROSENDIN, LOUIS, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 1950 LEIGH ANN PL<br>City SAN JOSE State CA Zip Code 95125-5637<br>FEC ID number of contributing federal political committee. <input type="text" value="C"/><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00    |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2021<br><b>Transaction ID : A13F84C2901C84180B3C</b><br>Amount of Each Receipt this Period<br>125.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  | 0.00                                                                                                                                                                                                          |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |                                                                                                                                                                                                               |



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLSSON, CARL, A, , M.D

Mailing Address 190 HAMILTON AVE

City  
NEW ROCHELLEState  
NYZip Code  
10801-2806FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MT SINAI HOSPITAL, NYOccupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 01    | 2021        |

Transaction ID : AB2D0F49E98394C5EA48

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PENNEBAKER, STACY, , ,

Mailing Address 380 RECTOR PL  
APT 4ACity  
NEW YORKState  
NYZip Code  
10280-1443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROWN HARRIS STEVENSOccupation (for Individual)  
REAL ESTATE ASSOCIATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 01    | 2021        |

Transaction ID : A79E96FAA4305409FA29

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REED, YU-HSUAN, L, ,

Mailing Address 681 SW WATERLOO AVE

City  
OAK HARBORState  
WAZip Code  
98277-8179FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 01    | 2021        |

Transaction ID : A1933F6B3D731491CA63

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 290 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBBINS, JOHN, W, ,

Mailing Address PO BOX 21554

City  
CARSON CITYState  
NVZip Code  
89721-1554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 01  | 2021        |

Transaction ID : ACF8886D635734C6C9D7

Amount of Each Receipt this Period

200.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRITCHARD, JOY, , ,

Mailing Address 27130 LAURELES GRADE RD

City  
CARMEL VALLEYState  
CAZip Code  
93924-9200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 01  | 2021        |

Transaction ID : A77C4B03ED3E142379F6

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRYS, JOHN, A, ,

Mailing Address 12975 EXCELSIOR AVE

City  
HANFORDState  
CAZip Code  
93230-9593FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 01  | 2021        |

Transaction ID : AE0119D922688425B864

Amount of Each Receipt this Period

125.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICKETTS, MARILYN, , ,**

Mailing Address 13773 CHARISMATIC WAY

City  
GAINESVILLE

State  
VA

Zip Code  
20155-3119

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : A8031474F12B94D7EBC2**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REVILEE, CLYDE, , ,**

Mailing Address 10834 GRAND FORK DR

City  
SANTEE

State  
CA

Zip Code  
92071-1934

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : A16FDC63A658E4DD2B2D**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUHLESTEIN, RALPH, , ,**

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : AD39981062E0643199E8**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REEVES, ROBERT, RAY, ,**

Mailing Address 4500 S ROLLING HILLS RD

City  
COLUMBIA

State  
MO

Zip Code  
65201-8828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
FARMING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2021

**Transaction ID : A7FEB44A61B3E42C89A0**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSEMAN, C., E., ,**

Mailing Address PO BOX 2128

City  
HICKORY

State  
NC

Zip Code  
28603-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CR LAINE FURNITURE CO.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2021

**Transaction ID : A1236085587934D3A86B**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2021

**Transaction ID : A64444B05CB614302A60**

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 293 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. RAFFANIELLO, PATRICK, , ,**

Mailing Address **1161 OLD GATE CT**

City  
**MCLEAN**

State  
**VA**

Zip Code  
**22102-2532**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**ATTORNEY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A75D3ED1F2B864361A65**

Amount of Each Receipt this Period

**250.00**

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PORTRA, DENNIS, , ,**

Mailing Address **104 BORCHARDT AVE**

City  
**UNDERWOOD**

State  
**ND**

Zip Code  
**58576-4009**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**COAL CREEK CONSTRUCTION INC**

Occupation (for Individual)  
**SMALL BUSINESS**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : AC83E584BFA7A46A8BA8**

Amount of Each Receipt this Period

**50.00**

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PORTRA, DENNIS, , ,**

Mailing Address **104 BORCHARDT AVE**

City  
**UNDERWOOD**

State  
**ND**

Zip Code  
**58576-4009**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**COAL CREEK CONSTRUCTION INC**

Occupation (for Individual)  
**SMALL BUSINESS**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : AA5B6FBA2C8CF4DE08C8**

Amount of Each Receipt this Period

**50.00**

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**0.00**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 294 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |                                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. RAK, HENRY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 2 VILLAGE DR<br>City TRUMBULL State CT Zip Code 06611-4800<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00         |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A53DDE006981C48D9891</b><br>Amount of Each Receipt this Period<br>25.00<br><input checked="" type="checkbox"/> Memo Item  |
| <b>B. RAK, HENRY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 2 VILLAGE DR<br>City TRUMBULL State CT Zip Code 06611-4800<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00         |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A867F6900ADCA465DB46</b><br>Amount of Each Receipt this Period<br>25.00<br><input checked="" type="checkbox"/> Memo Item  |
| <b>C. QUINN, JOHN, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 490 5TH ST S UNIT 304<br>City NAPLES State FL Zip Code 34102-6578<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A37002539F67B4A2B96E</b><br>Amount of Each Receipt this Period<br>250.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  | 0.00                                                                                                                                                                                                          |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |                                                                                                                                                                                                               |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. POLLARD, ROBERT, W., JR.**

Mailing Address 5812 TUBMAN RD

City  
APPLING

State  
GA

Zip Code  
30802-3524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A43D7DD9C21DE4322AD5**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. REINHARD, DONALD, G.,**

Mailing Address 75 HARVARD AVE

City

PALMERTON

State

PA

Zip Code

18071-1212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
PENCOR SERVICES

Occupation (for Individual)  
SEMI RETIRED EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A8113BB844C2543849E2**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City

VISALIA

State

CA

Zip Code

93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : A24B2E5960C0D4277BE3**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
TRANSFER FROM JFC

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONROY, DENNIS, J, ,

Mailing Address 1 CHRISTIE PL  
UNIT 201City  
SCARSDALEState  
NYZip Code  
10583-8302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A16EAB1A8B2B845BEA4F

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIDSON, MELVIN, L, ,

Mailing Address 4908 ISLE VIEW DR

City

RHINELANDER

State

WI

Zip Code

54501-2106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A6FE2C34B873A415C852

Amount of Each Receipt this Period

375.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CREEKMORE, JUDITH, C, ,

Mailing Address 1885 NW 108TH AVE

City

PLANTATION

State

FL

Zip Code

33322-6431

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 20    | 2021        |

Transaction ID : A2D6D5506CD3648168E7

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2021

**Transaction ID : A27547138B9714E52A85**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

**Transaction ID : A6046AFFC05274E3A917**

Amount of Each Receipt this Period

15.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 18 / 2021

**Transaction ID : A7354F0DF3808463884F**

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 298 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : AD860CE0660C0427B9B8**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A3D3F891297FF49DDB70**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CORASICK, MARGARET, , ,**

Mailing Address 1517 N DEVONWOOD LN

City  
CLOVIS

State  
CA

Zip Code  
93619-0415

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A8F1418B12F3B4779A21**

Amount of Each Receipt this Period

100.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 299 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

**05** / **26** / **2021**

**Transaction ID : A692524352ABA401989A**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAMON, ALBERT, , , III**

Mailing Address 101 PINE HILL RD

City  
WAKEFIELD

State  
RI

Zip Code  
02879-2824

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : ADD304962078C4AB0BCE**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAMON, ALBERT, , , III**

Mailing Address 101 PINE HILL RD

City  
WAKEFIELD

State  
RI

Zip Code  
02879-2824

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2021**

**Transaction ID : A2C078ED19D4F460A899**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 300 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAMON, ALBERT, , , III

Mailing Address 101 PINE HILL RD

City  
WAKEFIELDState  
RIZip Code  
02879-2824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : A5C86D0321AD14545997

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A462ED3BA4B7C49E69B5

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROOCK, PAULA, , ,

Mailing Address 825 BROOKHAVEN DR  
APT BCity  
BROOKINGSState  
ORZip Code  
97415-7150FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : AECDBD99DA3124A63A27

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROOCK, PAULA, , ,**

Mailing Address 825 BROOKHAVEN DR  
APT B

City  
BROOKINGS

State  
OR

Zip Code  
97415-7150

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A4006EFCFD40643D79B1**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALCOTE, LEONA, F, ,**

Mailing Address PO BOX 17024

City  
FOUNTAIN HILLS

State  
AZ

Zip Code  
85269-7024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
REQUESTED

Occupation (for Individual)  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 26 / 2021**

**Transaction ID : AD21B8E7B38204C3EA10**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BYMA, DONNA, J, ,**

Mailing Address 5736 KNOB HILL CIR

City  
CLARKSTON

State  
MI

Zip Code  
48348-4861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 19 / 2021**

**Transaction ID : A65C66E398ABC43B6B9D**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 302 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.75

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

Transaction ID : A4B99FDB6B3C54F938FB

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.75

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

Transaction ID : A1BDD4D0529E74D7584F

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1286.25

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : AB01D714D306841B993C

Amount of Each Receipt this Period

12.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 303 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROOKS, JUSTINE, , ,

Mailing Address 7 MILL BROOK DR

City  
TEMPLETONState  
MAZip Code  
01468-1485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1306.25

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 25  | 2021    |

Transaction ID : AB58FDE28DD3240F1A07

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMENTZ, ERNST, , ,

Mailing Address 8500 SOUTHWIND BAY CIR

City  
FORT MYERSState  
FLZip Code  
33908-6029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CREATION GARDENSOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 11  | 2021    |

Transaction ID : A062FE245B2484655A37

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAMENTZ, ERNST, , ,

Mailing Address 8500 SOUTHWIND BAY CIR

City  
FORT MYERSState  
FLZip Code  
33908-6029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CREATION GARDENSOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 25  | 2021    |

Transaction ID : AF70EAB36EFCF462DB31

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 OF 426

(check only one)

|                              |                              |                              |                                                         |
|------------------------------|------------------------------|------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12                  |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A7D5211D3EE374D9FA96

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZARKOVACKI, DAN, , ,**

Mailing Address 4950 MCCORMICK DR

City  
RICHFIELDState  
OHZip Code  
44286-9212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
REAL ESTATE DEVLOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AB643A6EC61994CB88F6

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOOD, HYMMAN, , REV.,**Mailing Address 701 W HERBERT AVE  
APT 16City  
REEDLEYState  
CAZip Code  
93654-3942FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AEA2D4E30C752431FB78

Amount of Each Receipt this Period

125.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

500.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 305 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YOUNUS, LOURDES, M, ,

Mailing Address 6015 W ARDMORE AVE

City  
CHICAGOState  
ILZip Code  
60646-5312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A6A00DA11BA094FB8AA0

Amount of Each Receipt this Period

37.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUNUS, LOURDES, M, ,

Mailing Address 6015 W ARDMORE AVE

City  
CHICAGOState  
ILZip Code  
60646-5312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A153EA069DCBC4E8EA97

Amount of Each Receipt this Period

37.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

Transaction ID : A7DF8269A75AA4F8C810

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEISS, PATRICIA, J, ,**

Mailing Address 301 28TH ST

UNIT A

City

MANHATTAN BEACH

State

CA

Zip Code

90266-2168

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 11  | 2021        |

Transaction ID : AC5016B3DFECB482AABE

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTELLA, RICHARD, G, ,**

Mailing Address PO BOX 97

City

FIDDLTOWN

State

CA

Zip Code

95629-0097

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 11  | 2021        |

Transaction ID : AA92C15D49367475AB48

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, VINCENT, , ,**

Mailing Address 421 BOLLA PL

City

ALAMO

State

CA

Zip Code

94507-1620

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 11  | 2021        |

Transaction ID : A60BEC0399A104E58BFE

Amount of Each Receipt this Period

125.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 307 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHAN, MARIANNA, , ,**

Mailing Address PO BOX 5548

City  
INCLINE VLGState  
NVZip Code  
89450-5548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REQUESTEDOccupation (for Individual)  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 11  | 2021    |

Transaction ID : ADA8406DF99D0442390D

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOORWOLD, FRANCIS, X, ,**

Mailing Address 307 RENAULT BLVD

City  
SUMMERVILLEState  
SCZip Code  
29483-5189FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.50

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 11  | 2021    |

Transaction ID : A5657D8C4B2954EACBFD

Amount of Each Receipt this Period

337.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, FRED, B, ,**Mailing Address 12800 NE SALMON CREEK AVE  
UNIT 107City  
VANCOUVERState  
WAZip Code  
98686-3024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 11  | 2021    |

Transaction ID : A4DBA393122DE4C7F8B8

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 308 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : AE9F375A4E55B49F5978

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEARST, SUSAN, R., ,**

Mailing Address 4650 OLD MILLSAP RD

City  
MILLSAPState  
TXZip Code  
76066-2545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A1046A1EDCDA146CE85B

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HESLEP, DONALD, B., ,**

Mailing Address 2700 WALHALA DR

City  
NORTH CHESTERFIELDState  
VAZip Code  
23236-1348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLUE AND GRAY SELF STORAGEOccupation (for Individual)  
BUILDER / DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A99B4E7984A3A48F2BBA

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARVEY, WILLIAM, T, ,

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : AF6E38DAA9A994DEAACI

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARVEY, WILLIAM, T, ,

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : A3E54014BC3F14B64894

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARVEY, WILLIAM, T, ,

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

610.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : A9CEBBFE3934F4E34B07

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARVEY, WILLIAM, T, ,**

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : AF98036683EFF4C2A8FF

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARVEY, WILLIAM, T, ,**

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : A8ED53D87C4584D22873

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARVEY, WILLIAM, T, ,**

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

610.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 29    |   | 2021        |

Transaction ID : ADA0474ED5E404E35B11

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARVEY, WILLIAM, T, ,

Mailing Address 136 ASPEN DR

City  
MADISONState  
MSZip Code  
39110-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A781B82A87E2448C19D4

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HIGGINS, BARBARA, FRANKLIN, ,

Mailing Address 2135 DRIP BRANCH RD

City  
HUEYTOWNState  
ALZip Code  
35023-7123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED GROCERY STORE OWNEF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A0FB46F95B1504F85A9A

Amount of Each Receipt this Period

375.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A00D6A21E43AB4C76B84

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KENNEDY, BERT, , MR.,**

Mailing Address 17966 SE VILLAGE CIR

City  
JUPITER

State  
FL

Zip Code  
33469-1731

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AB4BE911A7CE540BF864**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KLAGES, DONALD, N, ,**

Mailing Address 10488 CHACE DR

City  
CUPERTINO

State  
CA

Zip Code  
95014-1010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
REQUESTED

Occupation (for Individual)  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AED4995E84BF548B2BB6**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KREYENHAGEN, SHEILAH, , ,**

Mailing Address 1001 FOLSOM ST

City  
COALINGA

State  
CA

Zip Code  
93210-1327

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
REQUESTED

Occupation (for Individual)  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A8C7F00EEDBEE4252B77**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRISHNASWAMY, SITA, , ,**

Mailing Address 120 BOERUM PL  
APT 3N

City  
BROOKLYN

State  
NY

Zip Code  
11201-6280

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A55203EF046F0478B80A

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KONG, JONATHAN, , ,**

Mailing Address 1921 SUSSEX CT

City  
SACRAMENTO

State  
CA

Zip Code  
95815-4130

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NA

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A82B62E6062674DDB9DD

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KONG, JONATHAN, , ,**

Mailing Address 1921 SUSSEX CT

City  
SACRAMENTO

State  
CA

Zip Code  
95815-4130

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NA

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : ABBFFBDD811E94558B9F

Amount of Each Receipt this Period

75.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 314 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENNY, MAUREEN, , ,**

Mailing Address 4230 DOUGLASTON PKWY

City  
LITTLE NECK

State  
NY

Zip Code  
11363-1538

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A2ED35CF67E3049618DA

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENNY, MAUREEN, , ,**

Mailing Address 4230 DOUGLASTON PKWY

City  
LITTLE NECK

State  
NY

Zip Code  
11363-1538

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AE4F24BEAA6A84D17AF0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMADRIZ, MARIA, CRISTINA, ,**

Mailing Address 8130 SW 89TH PL

City  
MIAMI

State  
FL

Zip Code  
33173-4187

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A6DEFDACC4DF84598B5A

Amount of Each Receipt this Period

- 772.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMADRIZ, MARIA, CRISTINA, ,**

Mailing Address 8130 SW 89TH PL

City  
MIAMI

State  
FL

Zip Code  
33173-4187

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7.50

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A0F1C8EE4DF1241D49B3**

Amount of Each Receipt this Period

772.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAZARUS, JANET, M, ,**

Mailing Address PO BOX 1597

City  
TULARE

State  
CA

Zip Code  
93275-1597

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SSSC.INC

Occupation (for Individual)  
COMMERCIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A72CEECA478764219B45**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUGIES, CHO-YOUNG, , ,**

Mailing Address 2820 BENSON WAY

City  
BELMONT

State  
CA

Zip Code  
94002-2939

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : AA52ACBA6D3D3471A998**

Amount of Each Receipt this Period

80.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06** / **02** / **2021**

**Transaction ID : A1DE1B070DA714DCF966**

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. MCDONALD, JUDY, , ,**

Mailing Address 2525 FOX RUN RD SW  
APT 9

City  
WYOMING

State  
MI

Zip Code  
49519-4116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A84B5D25E2349403F839**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MCKENNA, THOMAS, P, ,**

Mailing Address 2763 GREEN ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94123-4608

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A2E7E75C53EC3414CB45**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCPHERSON, WARREN, , ,

Mailing Address 2550 WILLOWOAK TRL  
# 204City  
MURFREESBOROState  
TNZip Code  
37129-2099FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.25

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A04EE9C38FA1447B391A

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MERRIMAN, CHARLES, H, , III

Mailing Address 5507 CARY STREET RD

City  
RICHMONDState  
VAZip Code  
23226-2304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A2E831473439744E2B7F

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCRAE, MARTHA, KAY, ,

Mailing Address PO BOX 9

City  
GRACEVILLEState  
FLZip Code  
32440-0009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A0CCA5CD8203F4ECF827

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AE423BCF698594DFF818**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A6796053412124FCCB88**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A17D0CA4E28AC47A2B88**

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AD8685948A46E4BDBA52**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, GLORIA, , ,**

Mailing Address 1324 OCEAN DR

City  
OXNARD

State  
CA

Zip Code  
93035-4556

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AE2D4AC351C724FB28C7**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASON, GLORIA, , ,**

Mailing Address 1324 OCEAN DR

City  
OXNARD

State  
CA

Zip Code  
93035-4556

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AD326D09148484A21A0B**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 320 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. MCBRIDE, HERMAN, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 309 S FORK ST<br>City JACKSON CENTER State OH Zip Code 45334-4004<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) SHELBY Occupation (for Individual) OWNER<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00                             |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A183D5D61B3DF4FB6B3B</b><br>Amount of Each Receipt this Period<br>50.00<br><input checked="" type="checkbox"/> Memo Item             |
| <b>B. NUNES VICTORY FUND</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address PO BOX 6545<br>City VISALIA State CA Zip Code 93290<br>FEC ID number of contributing federal political committee. <b>C</b> C00544031<br>Name of Employer (for Individual) Occupation (for Individual)<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 182432.00                                             |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 02 / 2021<br><b>Transaction ID : AC5103FAD9CEE4416B02</b><br>Amount of Each Receipt this Period<br>1000.00<br><input type="checkbox"/> Memo Item<br>TRANSFER FROM JFC |
| <b>C. PORTRA, DENNIS, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 104 BORCHARDT AVE<br>City UNDERWOOD State ND Zip Code 58576-4009<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) COAL CREEK CONSTRUCTION INC Occupation (for Individual) SMALL BUSINESS<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 20 / 2021<br><b>Transaction ID : A4EBEF474853F49EBB06</b><br>Amount of Each Receipt this Period<br>50.00<br><input checked="" type="checkbox"/> Memo Item             |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  | 1000.00                                                                                                                                                                                                                  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |                                                                                                                                                                                                                          |



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 321 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ALLEN, JOANN, R, ,**

Mailing Address 13391 BANNER LAVA CAP RD

City  
NEVADA CITY

State  
CA

Zip Code  
95959-8942

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HOUSEWIFE

Occupation (for Individual)  
HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05 / 22 / 2021**

**Transaction ID : A81DD29C99EE84595AC4**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FRIDRICH, HEINZ, K, ,**

Mailing Address 131 LONG POINT DR

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-6410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

**05 / 21 / 2021**

**Transaction ID : AD61709B9B2F34E4AAB5**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MALMBERG, LARRY, , ,**

Mailing Address 1000 S HIGHWAY 395

City  
HERMISTON

State  
OR

Zip Code  
97838-2663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

**05 / 21 / 2021**

**Transaction ID : A1A958515E98B45E5A50**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 322 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |                                                                                                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. MALMBERG, LARRY, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 1000 S HIGHWAY 395<br>City HERMISTON State OR Zip Code 97838-2663<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 21 / 2021<br><b>Transaction ID : A266DFFA844B44933BBA</b><br>Amount of Each Receipt this Period<br>25.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>B. MIOTKE, ROBERT, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 1681 BUENA VISTA DR<br>City CLARKDALE State AZ Zip Code 86324-0018<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 562.50 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 21 / 2021<br><b>Transaction ID : A7D9EC070BE2C4C1AB39</b><br>Amount of Each Receipt this Period<br>12.50<br><input checked="" type="checkbox"/> Memo Item |
| <b>C. EDGECOMB, GINA, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 7648 PEPPERTREE RD<br>City DUBLIN State CA Zip Code 94568-2244<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 305.00     |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>05 / 21 / 2021<br><b>Transaction ID : A151938C8EB3F4AB8B9C</b><br>Amount of Each Receipt this Period<br>25.00<br><input checked="" type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  | 0.00                                                                                                                                                                                                       |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |                                                                                                                                                                                                            |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 323 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DODGE, MARY, , ,

Mailing Address 267 BAREFOOT BEACH BLVD  
APT 301City  
BONITA SPRINGSState  
FLZip Code  
34134-2507FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 22    | / | 2021        |

Transaction ID : A7A47A6D4CED74E45BC3

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAESGEN, DIETER, , ,

Mailing Address 19460 FRAZIER DR

City  
ROCKY RIVERState  
OHZip Code  
44116-1727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 22    | / | 2021        |

Transaction ID : AD61D311E83AE4EB1970

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHUSTER, KEVIN, , ,

Mailing Address 18251 CABRILLO CT

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708-5905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 22    | / | 2021        |

Transaction ID : A5F7540F2D20440629CD

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLISON, PAUL, , ,

Mailing Address 407 COUNTRY CLUB RD

City  
SALINAState  
KSZip Code  
67401-3508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 23    | / | 2021        |

Transaction ID : AAF0765B1587F456E92B

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MASON, GLORIA, , ,

Mailing Address 1324 OCEAN DR

City  
OXNARDState  
CAZip Code  
93035-4556FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 23    | / | 2021        |

Transaction ID : A72FBBBD268E4A27B34

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAFFEY, EUNICE, L, ,

Mailing Address 725 1ST ST S  
UNIT 101City  
KIRKLANDState  
WAZip Code  
98033-6552FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 23    | / | 2021        |

Transaction ID : A4F93F317241144AAA11

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 325 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIOTKE, ROBERT, , ,

Mailing Address 1681 BUENA VISTA DR

City  
CLARKDALEState  
AZZip Code  
86324-0018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 3 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A8C512F6964AC4B869F6

Amount of Each Receipt this Period

5.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VOGEL, CLAUDETTE, D., ,

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEKState  
CAZip Code  
94598-4554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 4 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A0A15F2C6F8B64D6081D

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VOGEL, CLAUDETTE, D., ,

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEKState  
CAZip Code  
94598-4554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

875.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 4 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AAE74529BC2F44489884

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 326 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOGEL, CLAUDETTE, D., ,**

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEK

State  
CA

Zip Code  
94598-4554

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

**05 / 24 / 2021**

**Transaction ID : A0C614BF70DAA45549F5**

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOGEL, CLAUDETTE, D., ,**

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEK

State  
CA

Zip Code  
94598-4554

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

**05 / 24 / 2021**

**Transaction ID : A16065BF714794BBCBEB**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOGEL, CLAUDETTE, D., ,**

Mailing Address 2922 COMISTAS DR

City  
WALNUT CREEK

State  
CA

Zip Code  
94598-4554

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

875.00

Date of Receipt

**05 / 24 / 2021**

**Transaction ID : AB0CB8E5D136B4853BE3**

Amount of Each Receipt this Period

75.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 327 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTERN, WAYNE, , ,**

Mailing Address 569 W ATHENS AVE

City  
CLOVIS

State  
CA

Zip Code  
93611-6737

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HAMMONDS RANCH, INC.

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**05 / 20 / 2021**

**Transaction ID : A2BFB80E8980243F2BE0**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEATLEY, GEORGE, , , JR.**

Mailing Address 509 MAIN ST  
UNIT B

City  
GROTON

State  
MA

Zip Code  
01450-4259

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**05 / 24 / 2021**

**Transaction ID : AC9F6A9BF03D34224AE3**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUREK, DAVID, , ,**

Mailing Address 461 MAHANEY RD

City  
KING FERRY

State  
NY

Zip Code  
13081-0000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TUREK FARMS MANAGEMENT, INC

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**05 / 22 / 2021**

**Transaction ID : A0EC3F591648D441681B**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 328 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, YONG, , ,**

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECT

State  
IL

Zip Code  
60056-3655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HTRD, LTD.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

**05 / 21 / 2021**

**Transaction ID : A261697D3F123413193B**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, YONG, , ,**

Mailing Address 1010 W LONNQUIST BLVD

City  
MOUNT PROSPECT

State  
IL

Zip Code  
60056-3655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HTRD, LTD.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05 / 22 / 2021**

**Transaction ID : AC00E3B0D4DDC401793B**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : A3312AE08148C43D7BFD**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
TRANSFER FROM JFC

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 329 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |                                        |                             |                             |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHROEDER, KATHRYN, L, ,**

Mailing Address 477 E LAKE SAMMAMISH PKWY SE

City  
SAMMAMISHState  
WAZip Code  
98074-3813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RET

Occupation (for Individual)

RET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

**Transaction ID : A19548D339A324025A48**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRUMBLE, WAYNE, S, MR.,**

Mailing Address 111 ORCHARD GROVE DR

City  
CLYDEState  
OHZip Code  
43410-1468FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

**Transaction ID : A75F4E7B37294405197B**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUNGAILA, RICHARD, J, ,**

Mailing Address 1827 PORT STANHOPE PL

City  
NEWPORT BEACHState  
CAZip Code  
92660-7120FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

**Transaction ID : A14A97E9BA3B64C9989F**

Amount of Each Receipt this Period

75.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, MAURICE, C, ,**

Mailing Address 4429 ROCK ISLAND DR

City  
ANTIOCH

State  
CA

Zip Code  
94509-7780

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : AB5EF63117FE74B379C4**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOCCOLA, FREDERICK, , ,**

Mailing Address 63 FISHER PL

City  
RED BANK

State  
NJ

Zip Code  
07701-2317

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BMC SOFTWARE

Occupation (for Individual)

SVP SALES AND OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : A581C7740A3B64F0DA88**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEPHENS, ALICE, L, ,**

Mailing Address 1404 RACHEL LN

City  
TALLAHASSEE

State  
FL

Zip Code  
32308-7723

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**06 / 01 / 2021**

**Transaction ID : A16CA0862AA0F4ABE966**

Amount of Each Receipt this Period

400.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOWNSEND, MARILYN, , ,**

Mailing Address 1130 WESTFIELD TER

City  
DAVISState  
CAZip Code  
95616-5725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

UC DAVIS

Occupation (for Individual)

NUTRITIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : A9CE8C94F3A32446FA6D

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEATLEY, GEORGE, , , JR.**Mailing Address 509 MAIN ST  
UNIT BCity  
GROTONState  
MAZip Code  
01450-4259FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : AC9D07194828D4FECACC

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHOWLEY, GINGER, M, ,**

Mailing Address 2524 LENA CT

City  
MINDENState  
NVZip Code  
89423-7021FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2021    |

Transaction ID : ADF47BA83ED244BA49A9

Amount of Each Receipt this Period

110.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 332 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

**Transaction ID : A59632FDEBC98493E83A**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITLOCK, GLORIA, S, ,**

Mailing Address 605 WINDSOR DR

City

BIRMINGHAM

State

AL

Zip Code

35209-4433

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JEFFCOAT MECHANICALOccupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

**Transaction ID : A651A5EB1DBDD4E2292D**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITLOCK, GLORIA, S, ,**

Mailing Address 605 WINDSOR DR

City

BIRMINGHAM

State

AL

Zip Code

35209-4433

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JEFFCOAT MECHANICALOccupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

**Transaction ID : A85193DC1C6394A83A0D**

Amount of Each Receipt this Period

50.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 333 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITLOCK, GLORIA, S, ,

Mailing Address 605 WINDSOR DR

City  
BIRMINGHAM

State  
AL

Zip Code  
35209-4433

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JEFFCOAT MECHANICAL

Occupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2021

Transaction ID : AA61354A4466642E5A45

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITLOCK, GLORIA, S, ,

Mailing Address 605 WINDSOR DR

City  
BIRMINGHAM

State  
AL

Zip Code  
35209-4433

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JEFFCOAT MECHANICAL

Occupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

Transaction ID : A8B4628B9147945A88DB

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, LINDSEY, F., ,

Mailing Address 6010 E APPIAN WAY

City  
LONG BEACH

State  
CA

Zip Code  
90803-4113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2021

Transaction ID : AA4B6133299F448389AF

Amount of Each Receipt this Period

282.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEEKS, ANNIE, H, ,

Mailing Address 6709 KEARSARGE WAY

City  
BAKERSFIELDState  
CAZip Code  
93309-3481FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 26    | 2021        |

Transaction ID : AB7B5E48B54D84138A28

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, MARY, , ,

Mailing Address 304 US HIGHWAY 101 S

City  
CRESCENT CITYState  
CAZip Code  
95531-4412FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OCEAN WORLDOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 27    | 2021        |

Transaction ID : A593CEF714F1A4129AFE

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WESTERHOLD, STEVE, , ,

Mailing Address 3257 ESPLANADE CIR SE

City  
RIO RANCHOState  
NMZip Code  
87124-7621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 03    | 2021        |

Transaction ID : A144ED658C25F4853AE9

Amount of Each Receipt this Period

17.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 335 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A69797FEBEAF041DE858**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A800B69C7955344E9BE3**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A1A5C0DF1F3AB45DA9E2**

Amount of Each Receipt this Period

12.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 18    |   | 2021        |

Transaction ID : AB0157110D06D4FFDB3B

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 18    |   | 2021        |

Transaction ID : A196737A2E0184716AF1

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 18    |   | 2021        |

Transaction ID : AF5029EC386304C709AA

Amount of Each Receipt this Period

12.50

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WESTERHOLD, STEVE, , ,**

Mailing Address 3257 ESPLANADE CIR SE

City State Zip Code  
RIO RANCHO NM 87124-7621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.50

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A25A2EAC8949240D3908**

Amount of Each Receipt this Period

12.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WHEATLEY, GEORGE, , , JR.**

Mailing Address 509 MAIN ST  
UNIT B

City State Zip Code  
GROTON MA 01450-4259

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : A88B34BB5B6D24C998F9**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. WILLIAMS, RICHARD, O, ,**

Mailing Address PO BOX 11365

City State Zip Code  
MIDLAND TX 79702-8365

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RICHARD O WILLIAMS LLC

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : A0EC6CE1E902A4121966**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WHITE, SHARON, B, ,**

Mailing Address 2219 LAKESIDE DR

City  
GREENWOOD

State  
AR

Zip Code  
72936-6103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : AC8EFA2DAFDC342D2909**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

**06 / 02 / 2021**

**Transaction ID : AE031C804D3BF4C1E876**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MAURER, PATRICIA, A, ,**

Mailing Address 445 E WOOSTER ST

City  
BOWLING GREEN

State  
OH

Zip Code  
43402-2927

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GREENBRIAR, INC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04 / 27 / 2021**

**Transaction ID : AD7BA420B67A54A22894**

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)..... ►

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGIVERN, TIMOTHY, , ,

Mailing Address 1634 14TH ST NW  
UNIT 203City  
WASHINGTONState  
DCZip Code  
20009-5443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OGILVY GOVERNMENT RELATIONSOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A1DF0AAB86F2F4284A11

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKENNA, PATRICK, , ,

Mailing Address 5407 W ARLINGTON ST

City  
YAKIMAState  
WAZip Code  
98908-4293FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2021

Transaction ID : ABFF7002CB5454010AC6

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCRAE, MARTHA, KAY, ,

Mailing Address PO BOX 9

City  
GRACEVILLEState  
FLZip Code  
32440-0009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2021

Transaction ID : A0FFE1F564D4A4341B90

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : AEC3AF2F4828E45BCA7D**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : AA342E80C18AF4C1B88B**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : AA6E882CEF61844A4970**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 341 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : AF987FF1DC3FD417CA26**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A27C52F2FE32A4E3DBDA**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : AA0C74B43370242558A9**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 342 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : AB63AD55246BF4B34836**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 11 / 2021**

**Transaction ID : A3660FE081DCA4326A58**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLE

State  
FL

Zip Code  
32440-0009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : A1CC67825BE2B4D7B8D2**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 343 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCRAE, MARTHA, KAY, ,**

Mailing Address PO BOX 9

City  
GRACEVILLEState  
FLZip Code  
32440-0009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AA4354124D578418E985

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASON, GLORIA, , ,**

Mailing Address 1324 OCEAN DR

City  
OXNARDState  
CAZip Code  
93035-4556FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 8 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A3B637A223A5E42C387B

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCPHERSON, WARREN, , ,**Mailing Address 2550 WILLOWOAK TRL  
# 204City  
MURFREESBOROState  
TNZip Code  
37129-2099FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 5 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AB437CAE99A1C4ABBA96

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MARKEY, DAVID, , ,**

Mailing Address 6404 BROOKSIDE DR

City  
CHEVY CHASE

State  
MD

Zip Code  
20815-6649

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **27** / **2021**

**Transaction ID : A3035C07FB0E847569EE**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MCBRIDE, HERMAN, , ,**

Mailing Address 309 S FORK ST

City  
JACKSON CENTER

State  
OH

Zip Code  
45334-4004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SHELBY

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **11** / **2021**

**Transaction ID : A339DB38DC4AA446A92A**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MCBRIDE, HERMAN, , ,**

Mailing Address 309 S FORK ST

City  
JACKSON CENTER

State  
OH

Zip Code  
45334-4004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SHELBY

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **11** / **2021**

**Transaction ID : A7A2AF6F18CC841FD820**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 345 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARKS, TOM, , ,

Mailing Address 2700 RAINTREE PL

City  
MODESTOState  
CAZip Code  
95355-4647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AG SEEDS UNLIMITEDOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 20    | 2021        |

Transaction ID : AC2B6A8D00C204A6C818

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCMANUS, JOHN, E., ,

Mailing Address 610 10TH ST. NW

City  
WASHINGTONState  
DCZip Code  
20001-4586FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE MCMANUS GROUPOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : A46BE540A26A442BA88D

Amount of Each Receipt this Period

1450.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A8007EBB6A51C40E98C2

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 346 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRAN, WILLIAM, E., ,**

Mailing Address 4601 HIGHWAY A1A  
APT 501

City  
VERO BEACH

State  
FL

Zip Code  
32963-1353

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : A02D6A3C08BCF4E3C96A

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CREEKMORE, JUDITH, C., ,**

Mailing Address 1885 NW 108TH AVE

City

PLANTATION

State  
FL

Zip Code  
33322-6431

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : A56D7452DACF24C36B3A

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CREEKMORE, JUDITH, C., ,**

Mailing Address 1885 NW 108TH AVE

City

PLANTATION

State  
FL

Zip Code  
33322-6431

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2021

Transaction ID : ADAF8CA07795442EF8A9

Amount of Each Receipt this Period

150.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULP, JANICE, W, ,**

Mailing Address 2216 S 3RD ST

City  
LAMESA

State  
TX

Zip Code  
79331-5035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A41A5F5986FC04EB6BA4

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DODGE, MARY, , ,**

Mailing Address 267 BAREFOOT BEACH BLVD  
APT 301

City

BONITA SPRINGS

State  
FL

Zip Code  
34134-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A8FFF31AA98B946B9BCD

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DODGE, MARY, , ,**

Mailing Address 267 BAREFOOT BEACH BLVD  
APT 301

City

BONITA SPRINGS

State  
FL

Zip Code  
34134-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AF6E6428EFBED4117B7C

Amount of Each Receipt this Period

20.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DODGE, MARY, , ,

Mailing Address 267 BAREFOOT BEACH BLVD  
APT 301

City  
BONITA SPRINGS

State  
FL

Zip Code  
34134-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A312BCA2BABC74F428A8

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DELONEY, THURMON, , ,

Mailing Address 6122 OLIVET DR

City

ALEXANDRIA

State

VA

Zip Code

22315-3874

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ICESS

Occupation (for Individual)

ENGINEERING CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A1C28448DDB08444891F

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DELONEY, THURMON, , ,

Mailing Address 6122 OLIVET DR

City

ALEXANDRIA

State

VA

Zip Code

22315-3874

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ICESS

Occupation (for Individual)

ENGINEERING CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AEC451F66EA5A438BAFD

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C

C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AC6B6B9406B8549308AA

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEAMAN, DAVID, E, ,**

Mailing Address 333 TIGER TAIL DR

City

ARROYO GRANDE

State  
CAZip Code  
93420-4413FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A0432ADB2435D423FA5B

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BATTS, WARREN, , ,**

Mailing Address 7450 OLIVETAS AVE APT 483

City

LA JOLLA

State  
CAZip Code  
92037-4924FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A9DA9AA75621F4FC9A5E

Amount of Each Receipt this Period

500.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

500.00

TOTAL This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLOXOM, JENNIFER, , ,

Mailing Address 20305 NE 38TH ST

City  
SAMMAMISHState  
WAZip Code  
98074-4312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 29    | / | 2021        |

Transaction ID : AFA08AFBDB4EE45B0BAI

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BATTLE, DEBBIE, , ,

Mailing Address 2 BRENNAN CT

City  
AMARILLOState  
TXZip Code  
79121-1058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 29    | / | 2021        |

Transaction ID : A4870538769874F0293F

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BINDEL, KATHERINE, , ,

Mailing Address 26085 ZDAN RD

City  
CARMEL VALLEYState  
CAZip Code  
93924-9240FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 29    | / | 2021        |

Transaction ID : AF68997E87598446B9AE

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 351 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AAF00DBE1731947AA95B**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AE4790C19412B4795B0E**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

530.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : ABF0E566244594D53B4E**

Amount of Each Receipt this Period

17.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16            | <input type="checkbox"/> 17 |                             |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AFD88C6F4EF4B4A1A8DA**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A0822D8F405E8461B9E0**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

530.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A33A691645C2F4661BD7**

Amount of Each Receipt this Period

17.50

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 353 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A3EAE2A40C2EE4E0E813**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENGTON, BRUCE, P., ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610-3120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A4C05623F7C2A48FB86B**

Amount of Each Receipt this Period

17.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BIGLIONE, SUSAN, M., ,**

Mailing Address 3401 LEE PKWY  
APT 1901

City  
DALLAS

State  
TX

Zip Code  
75219-5227

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04 / 29 / 2021**

**Transaction ID : A6D557F285BB64838B38**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 02  | 2021    |

**Transaction ID : A9DA561922D4E43B2B8F**

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBBINS, JOHN, W, ,**

Mailing Address PO BOX 21554

City  
CARSON CITYState  
NVZip Code  
89721-1554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

**Transaction ID : AD577DF737E24418DA55**

Amount of Each Receipt this Period

155.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBBINS, JOHN, W, ,**

Mailing Address PO BOX 21554

City  
CARSON CITYState  
NVZip Code  
89721-1554FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

**Transaction ID : A8DBE156F78C14CA3A05**

Amount of Each Receipt this Period

100.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 355 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUBIN, RICHARD, L, ,**

Mailing Address 3075 GREY EAGLE DR

City  
WALNUT CREEK

State  
CA

Zip Code  
94595-3934

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AA22AFA0B00064254917**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SALADINO, CRAIG, , ,**

Mailing Address 3325 W FIGARDEN DR

City  
FRESNO

State  
CA

Zip Code  
93711-3909

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SALADINO'S FOOD SERVICE

Occupation (for Individual)  
DISTRIBUTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A3E6302D5B04B4EDDAAC**

Amount of Each Receipt this Period

1450.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTS, GARY, , ,**

Mailing Address 1328 LONGSHORE LN

City  
LAKE HAVASU CITY

State  
AZ

Zip Code  
86404-5999

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AEF7B322E05A44CB38E2**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 356 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTS, GARY, , ,**

Mailing Address 1328 LONGSHORE LN

City  
LAKE HAVASU CITY

State  
AZ

Zip Code  
86404-5999

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AA4C65094C1ED4790842

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTS, GARY, , ,**

Mailing Address 1328 LONGSHORE LN

City  
LAKE HAVASU CITY

State  
AZ

Zip Code  
86404-5999

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A27EBB71D1F2E4817863

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A26D157596B2F4E61BD5

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A5603D27CF7F14071ADD**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A6FB02C351B36496E871**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A5D94E27114ED48D0B64**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 358 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : ABC748AD3D9D24CC3B32**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A822F51DC3AA74F54996**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A13210C81024945918FD**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 359 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A9066414494FC48DAB81**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : ADE0A2F261D0F4838B79**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A8E2A039A78194D1397E**

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AE95B397154AC46209BB**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A3B5561A33B9F48DFA42**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODDEN, BARBARA, L, ,**

Mailing Address 1188 W PLACITA INSPIRADA

City  
GREEN VALLEY

State  
AZ

Zip Code  
85614-4732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A046252FC071346148B0**

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AAB27AED2538E4E72B43**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : A1AE57ECBAD6349B8A81**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

735.00

Date of Receipt

**04** / **29** / **2021**

**Transaction ID : AD2E9AB3888814563ADC**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 362 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

**Transaction ID : AB616821E0C544C1C9D2**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

**Transaction ID : A432B1413C0034D638EA**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

735.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

**Transaction ID : AF711455CE9EE40E0AE2**

Amount of Each Receipt this Period

25.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A39E0E01B82014CADBB4**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A91CAE93F151343A5800**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENO

State  
NV

Zip Code  
89510-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AE21446D0F4BD42F299A**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

**Transaction ID : A8B37963E095E44BA864**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

**Transaction ID : ADA853234AE8E45BD80D**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RODGERS, STEVE, A, ,**

Mailing Address PO BOX 11902

City  
RENOState  
NVZip Code  
89510-1902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

735.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

**Transaction ID : A18645DB804C340D1873**

Amount of Each Receipt this Period

25.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUBIN, ARNOLD, J, ,

Mailing Address 80 PURITAN LN

City  
SUDBURYState  
MAZip Code  
01776-2427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

Transaction ID : A57FD0808E455471D8C2

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUTKOWSKI, HELENA, , ,

Mailing Address 200 DEER RUN

City  
BURLINGTONState  
CTZip Code  
06013-1837FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RUTKOWSKI PAINTOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 29  | 2021        |

Transaction ID : AF18B76B33A624A488AE

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 02  | 2021        |

Transaction ID : AB36C533A53D24948A5B

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIELSEN, DAVID, , ,**

Mailing Address 601 SEQUOIA DR

City  
EXETER

State  
CA

Zip Code  
93221-1234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NIELSEN ASSOC. INS.

Occupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AD69893A9D2054B89A7B

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPHITES, TASSOS, J., MR.,**

Mailing Address 1800 BROAD BAY CIR

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23454-1501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BURGERBUSTERS, INC.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : A86E671FBCE8F42C98F5

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'MALLEY, JOHN, J., ,**

Mailing Address 31 WOODCHESTER DR

City  
MILTON

State  
MA

Zip Code  
02186-4801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

Transaction ID : AF3E5AA47244249B49D1

Amount of Each Receipt this Period

50.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 367 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'MALLEY, JOHN, J, ,**

Mailing Address 31 WOODCHESTER DR

City  
MILTON

State  
MA

Zip Code  
02186-4801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A48023373D7EB4D52B48**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRICONE, JOE, , ,**

Mailing Address 18 OLD COURSE DR

City

NEWPORT BEACH

State

CA

Zip Code

92660-4276

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PERRICONE JUICES

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AD098325CB02240C7B24**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'BRIEN, PATRICIA, M, ,**

Mailing Address 535 E 86TH ST  
APT 20D

City

NEW YORK

State

NY

Zip Code

10028-7533

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AEDC2437C995140868F7**

Amount of Each Receipt this Period

375.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NOBLE, FREDERICK, W, ,

Mailing Address 2045 E TAHQUITZ CANYON WAY

City  
PALM SPRINGSState  
CAZip Code  
92262-7003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WIN TECH ENERGY LTDOccupation (for Individual)  
PRESIDENT/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A43E7609F8474463C892

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PANENKA, KARIN, , ,

Mailing Address 1 HALSTEAD TER

City  
IRVINEState  
CAZip Code  
92603-3508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AF40FAD48873B459E8E2

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PECK, ELLEN, , ,

Mailing Address 130 SUNRISE AVE

City  
PALM BEACHState  
FLZip Code  
33480-3961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AFB6FBDC11AB45AA901

Amount of Each Receipt this Period

25.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PECK, ELLEN, , ,**

Mailing Address 130 SUNRISE AVE

City  
PALM BEACHState  
FLZip Code  
33480-3961FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : ADF75427B96AE41F08F2

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, DONALD, , ,**Mailing Address 17300 N 88TH AVE  
APT 154City  
PEORIAState  
AZZip Code  
85382-4794FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : A1226E3E54721402BB86

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PECK, JOHN, , , JR.**

Mailing Address 5940 WATSON AVE

City  
DALLASState  
TXZip Code  
75225-1651FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 29  | 2021    |

Transaction ID : AD818C00F1CD640E6996

Amount of Each Receipt this Period

1450.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 370 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C

C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 02    | 2021        |

Transaction ID : A3682A43C1595439D9B3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABATTI, ALEX, , , JR.**

Mailing Address 2015 SILSBEE RD

City  
EL CENTROState  
CAZip Code  
92243-9671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALEX ABATTI JR FARMSOccupation (for Individual)  
FORMER CEO PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : A9A945C68F06740D8B39

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEN, JOANN, R, ,**

Mailing Address 13391 BANNER LAVA CAP RD

City  
NEVADA CITYState  
CAZip Code  
95959-8942FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOUSEWIFEOccupation (for Individual)  
HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

Transaction ID : A73B09DDF459346F087B

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1000.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16            | <input type="checkbox"/> 17 |                             |

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLEN, JOANN, R, ,

Mailing Address 13391 BANNER LAVA CAP RD

City  
NEVADA CITYState  
CAZip Code  
95959-8942FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOUSEWIFEOccupation (for Individual)  
HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 25    | 2021        |

Transaction ID : AD0B9D16327EF4F1E92F

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARVIDSON, JOYCE, B., ,

Mailing Address 1137 E RIALTO AVE

City  
FRESNOState  
CAZip Code  
93704-3315FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 13    | 2021        |

Transaction ID : AB2EF742FB43942AD98B

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARCHER, ROBERT, P., , SR.

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LANDState  
TXZip Code  
77479-2525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE - RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

Transaction ID : A0E2BFA3D658740DCAA9

Amount of Each Receipt this Period

75.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 372 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARCHER, ROBERT, P, , SR.**

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2525

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

**05** / **18** / **2021**

**Transaction ID : AD1CC9F8EE9D04CE4AB5**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARCHER, ROBERT, P, , SR.**

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2525

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

**05** / **18** / **2021**

**Transaction ID : ADF8512FC66494887AB1**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARCHER, ROBERT, P, , SR.**

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2525

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

**05** / **18** / **2021**

**Transaction ID : A3CAA8FAD8FFE415D932**

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16            | <input type="checkbox"/> 17 |                             |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARCHER, ROBERT, P, , SR.**

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2525

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : A07AC65BC4F4A43E4920**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARCHER, ROBERT, P, , SR.**

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2525

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : A34E8B550150044ECBD9**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARCHER, ROBERT, P, , SR.**

Mailing Address 20 SAINT PETERS WALK

City  
SUGAR LAND

State  
TX

Zip Code  
77479-2525

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NONE - RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

**05 / 18 / 2021**

**Transaction ID : AA3BE1B35E5E74E45B87**

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 374 OF 426  
(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBERT, MEGAN, , ,**

Mailing Address 1611 N HERMITAGE AVE

City  
CHICAGOState  
ILZip Code  
60622-1472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALTON MKTGOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

**Transaction ID : A2B1416A05FAB483D94D**

Amount of Each Receipt this Period

37.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALBERT, MEGAN, , ,**

Mailing Address 1611 N HERMITAGE AVE

City  
CHICAGOState  
ILZip Code  
60622-1472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALTON MKTGOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 11    | 2021        |

**Transaction ID : AAFFE70B025C34983803**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALBERT, MEGAN, , ,**

Mailing Address 1611 N HERMITAGE AVE

City  
CHICAGOState  
ILZip Code  
60622-1472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALTON MKTGOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

692.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 05    | 18    | 2021        |

**Transaction ID : AABCA6D6269CC4C259C7**

Amount of Each Receipt this Period

25.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 375 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALBERT, MEGAN, , ,

Mailing Address 1611 N HERMITAGE AVE

City  
CHICAGOState  
ILZip Code  
60622-1472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALTON MKTGOccupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 5 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A5EDBF30FE6204C99A18

Amount of Each Receipt this Period

40.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, RICHARD, N, ,

Mailing Address 9885 MELBA LN

City  
WHITESVILLEState  
KYZip Code  
42378-9418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HUNTER DOUGLASOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 7 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A173D522AB73341CF921

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 2 |   |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A1B8C0ED6031044BD860

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STREHLE, RICHARD, W, ,**

Mailing Address 1738 TONI CT

City  
MINDEN

State  
NV

Zip Code  
89423-7007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 13 / 2021

Transaction ID : A5006841480DE4501B8E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, JOY, , ,**

Mailing Address 14625 SAILFISH DR

City  
CORAL GABLES

State  
FL

Zip Code  
33158-1805

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICABLE INTL

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 25 / 2021

Transaction ID : A9825F3C24D3F4D238E8

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPRENGER, KURT, , ,**

Mailing Address 1413 BLACKSTONE AVE

City  
SAN JOSE

State  
CA

Zip Code  
95118-1140

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2021

Transaction ID : AC835534812714117B33

Amount of Each Receipt this Period

125.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEINKAMP, JEFFREY, , ,**

Mailing Address 500 GREAT HAWK RD

City  
ROCHESTER

State  
VT

Zip Code  
05767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

**Transaction ID : A93A3536339074326B12**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEINKAMP, JEFFREY, , ,**

Mailing Address 500 GREAT HAWK RD

City  
ROCHESTER

State  
VT

Zip Code  
05767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

**Transaction ID : A939181F15C68442AAAA9**

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEELMAN, TAMARA, , ,**

Mailing Address 5361 WEDGE CIR

City  
FAIR OAKS

State  
CA

Zip Code  
95628-3434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2021

**Transaction ID : A04B65E0CD4C94FFB9E8**

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 378 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEELMAN, TAMARA, , ,**

Mailing Address 5361 WEDGE CIR

City  
FAIR OAKS

State  
CA

Zip Code  
95628-3434

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 25 / 2021**

**Transaction ID : AE779A8BDB72F4096B6A**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANGO, SUSAN, , ,**

Mailing Address 94 CEDAR ST

City  
CEDAR GROVE

State  
NJ

Zip Code  
07009-1703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05 / 03 / 2021**

**Transaction ID : AD54AADA85B5C4E0D959**

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STAI, DIAN, GRAVES, ,**

Mailing Address 1286 CHERRY SPRING RD

City  
FREDERICKSBURG

State  
TX

Zip Code  
78624-6270

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 13 / 2021**

**Transaction ID : A8563515E89604641BEE**

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)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 379 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

C

C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2021

**Transaction ID : ABF9301A3416D42D08E3**

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ARIAS, RAMON, , ,**

Mailing Address 883 E 39TH PL

City  
HIALEAH

State  
FL

Zip Code  
33013-2866

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A369B4EF6A10548928BE**

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BAHLER, WALTER, , ,**

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTON

State  
IN

Zip Code  
47977-8867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AE6CDC5FEAC0543559E5**

Amount of Each Receipt this Period

10.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

500.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BAHLER, WALTER, , ,

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTONState  
INZip Code  
47977-8867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AAB5FF5C84DA049C081B

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAHLER, WALTER, , ,

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTONState  
INZip Code  
47977-8867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A9A92861610594EC9AA0

Amount of Each Receipt this Period

20.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BAHLER, WALTER, , ,

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTONState  
INZip Code  
47977-8867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.50

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A9C186B6BFC984E31A77

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                        |                                                                                                              |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------|--------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. ALBERT, MEGAN, , ,</b>                 |             |                        | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A5B5733F93D2A4E1F814</b> |  |
| Mailing Address 1611 N HERMITAGE AVE                                                                                            |             |                        | Amount of Each Receipt this Period<br>37.50                                                                  |  |
| City<br>CHICAGO                                                                                                                 | State<br>IL | Zip Code<br>60622-1472 | <input checked="" type="checkbox"/> Memo Item                                                                |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                        | Aggregate Year-to-Date ▼<br>580.00                                                                           |  |
| Name of Employer (for Individual)<br>WALTON MKTG                                                                                |             |                        | Occupation (for Individual)<br>SELF EMPLOYED                                                                 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |                        |                                                                                                              |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. NUNES VICTORY FUND</b>                 |             |                        | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 02 / 2021<br><b>Transaction ID : A57AB613831194266A54</b> |  |
| Mailing Address PO BOX 6545                                                                                                     |             |                        | Amount of Each Receipt this Period<br>1000.00                                                                |  |
| City<br>VISALIA                                                                                                                 | State<br>CA | Zip Code<br>93290      | <input type="checkbox"/> Memo Item<br>TRANSFER FROM JFC                                                      |  |
| FEC ID number of contributing federal political committee.<br>C C00544031                                                       |             |                        | Aggregate Year-to-Date ▼<br>182432.00                                                                        |  |
| Name of Employer (for Individual)                                                                                               |             |                        | Occupation (for Individual)                                                                                  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |                        |                                                                                                              |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. PALANDJIAN, SHEILA, , ,</b>            |             |                        | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 27 / 2021<br><b>Transaction ID : A0ABDA7B2D5F64373B9C</b> |  |
| Mailing Address 200 BRADLEY PL<br>APT 303                                                                                       |             |                        | Amount of Each Receipt this Period<br>100.00                                                                 |  |
| City<br>PALM BEACH                                                                                                              | State<br>FL | Zip Code<br>33480-3771 | <input checked="" type="checkbox"/> Memo Item                                                                |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                        | Aggregate Year-to-Date ▼<br>300.00                                                                           |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             |                        | Occupation (for Individual)<br>RETIRED                                                                       |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             |                        |                                                                                                              |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                        | 1000.00                                                                                                      |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                        |                                                                                                              |  |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 OF 426

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PANENKA, KARIN, , ,**

Mailing Address 1 HALSTEAD TER

City  
IRVINE

State  
CA

Zip Code  
92603-3508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

Transaction ID : AC185F9E69CEF41FE99A

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PECK, ELLEN, , ,**

Mailing Address 130 SUNRISE AVE

City

PALM BEACH

State  
FL

Zip Code  
33480-3961

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2021

Transaction ID : A1CF26F1DB7AB446DAE1

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'NEILL, KRISTAN, , ,**

Mailing Address PO BOX 103

City

SHAVER LAKE

State  
CA

Zip Code  
93664-0103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2021

Transaction ID : A7066D23F4B9B43788D8

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 383 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PENCE, NANCY, , ,**

Mailing Address 5179 SILVER SAGE DR

City  
CARSON CITY

State  
NV

Zip Code  
89701-8506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 25 / 2021

Transaction ID : AE2D12EAEFFD74C66BFE

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PENCE, NANCY, , ,**

Mailing Address 5179 SILVER SAGE DR

City  
CARSON CITY

State  
NV

Zip Code  
89701-8506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 25 / 2021

Transaction ID : AF77F3F89F0B24D4F9C9

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PENCE, NANCY, , ,**

Mailing Address 5179 SILVER SAGE DR

City  
CARSON CITY

State  
NV

Zip Code  
89701-8506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 25 / 2021

Transaction ID : A6D89D22DB6D642C79B2

Amount of Each Receipt this Period

25.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 384 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C

C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : A3C46DB53D44546AABF9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

TRANSFER FROM JFC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CZYZYK, JOSEPH, A, ,**

Mailing Address 0 BUGGY WHIP DR

City  
ROLLING HILLSState  
CAZip Code  
90274-5000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MERCURY AIR GROUPOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 0 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : AA319B04FFF7F4093827

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C

C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

182432.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 2 |   | 2 | 0 | 2 | 1 |   |   |

Transaction ID : ABC02AC389025477BA23

Amount of Each Receipt this Period

500.00

☐ Memo Item

TRANSFER FROM JFC

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL This Period (last page this line number only)..... ►



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 385 OF 426  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**NEW PAC**

|                                                                                                                                 |             |                                        |                                                                                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|------------------------------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. SPANGLER, WILLIAM, , ,</b>             |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A4E412AC5D10D4E7BA96</b> |  |
| Mailing Address 3196 ALLEGHENY CT                                                                                               |             |                                        | Amount of Each Receipt this Period<br>500.00                                                               |  |
| City<br>WESTLAKE VILLAGE                                                                                                        | State<br>CA | Zip Code<br>91362-3505                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>500.00     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. SUNGAILA, RICHARD, J, ,</b>            |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A70439E2153B24DC096E</b> |  |
| Mailing Address 1827 PORT STANHOPE PL                                                                                           |             |                                        | Amount of Each Receipt this Period<br>50.00                                                                |  |
| City<br>NEWPORT BEACH                                                                                                           | State<br>CA | Zip Code<br>92660-7120                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>215.00     |                                                                                                            |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. SPRANKLE, JOSEPH, F, , III</b>         |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>04 / 29 / 2021<br><b>Transaction ID : A62CCCE0271BE45BABF7</b> |  |
| Mailing Address 901 FREERS CT                                                                                                   |             |                                        | Amount of Each Receipt this Period<br>250.00                                                               |  |
| City<br>CHESAPEAKE                                                                                                              | State<br>VA | Zip Code<br>23322-4260                 | <input checked="" type="checkbox"/> Memo Item                                                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                                            |  |
| Name of Employer (for Individual)<br>RETIRED                                                                                    |             | Occupation (for Individual)<br>RETIRED |                                                                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>250.00     |                                                                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                           |             |                                        | 0.00                                                                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                 |             |                                        |                                                                                                            |  |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 386 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3525.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A3378769374D44EBC8FB

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3525.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A0961543FB02349C18D8

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAFT, NANCY, , ,

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3525.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : ACE5BB0441934481BB9C

Amount of Each Receipt this Period

75.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 387 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16            | <input type="checkbox"/> 17 |                             |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AAB091B9529F9412BB84**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : A453E1EFF07B94A54841**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAFT, NANCY, , ,**

Mailing Address 22377 CONCORD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2021

**Transaction ID : AAAD715C3E86A463E9A0**

Amount of Each Receipt this Period

75.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 388 OF 426

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEINKAMP, JEFFREY, , ,

Mailing Address 500 GREAT HAWK RD

City  
ROCHESTERState  
VTZip Code  
05767FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : A71A01EE617FF4B759BC

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANGO, SUSAN, , ,

Mailing Address 94 CEDAR ST

City  
CEDAR GROVEState  
NJZip Code  
07009-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 04    | 29    | 2021        |

Transaction ID : AB62ECBF4E7AF4EA9BB4

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNES VICTORY FUND

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290FEC ID number of contributing  
federal political committee.

C C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

407432.00

Date of Receipt

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 06    | 23    | 2021        |

Transaction ID : A214F8ACD4E9C4BFCBB6

Amount of Each Receipt this Period

225000.00

☐ Memo ItemJFC TRANSFER - DONOR INFORMATION  
DISCLOSED IN PRIOR DISTRIBUTIONS

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

225000.00

# **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)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507432.00

Date of Receipt

**06** / **30** / **2021**

**Transaction ID : AEDA0C3EFDFCD43BFA6**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

JFC TRANSFER - DONOR INFORMATION  
DISCLOSED IN PRIOR DISTRIBUTIONS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100000.00

419647.83

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 390 OF 426

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. INNOVATIVE EMPLOYEE SOLUTIONS**

Mailing Address 9665 GRANITE RIDGE DR. #420

City  
SAN DIEGOState  
CAZip Code  
92123-2659Purpose of Disbursement  
SEE MEMO ITEMS

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : B3717C1F86f

Amount of Each Disbursement this Period

1230.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HENDERSON, CLARISSA, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : B95BDDDA5E

Amount of Each Disbursement this Period

922.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAGAN, CRYSTAL, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : B0E610D013

Amount of Each Disbursement this Period

307.50

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1230.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 391 OF 426

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. INNOVATIVE EMPLOYEE SOLUTIONS**

Mailing Address 9665 GRANITE RIDGE DR. #420

City  
SAN DIEGOState  
CAZip Code  
92123-2659Purpose of Disbursement  
SEE MEMO ITEMS

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04    |   | 20    |   | 2021      |

FEC Identification Number

C

Transaction ID : B5A4D8E8A3

Amount of Each Disbursement this Period

1261.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAGAN, CRYSTAL, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04    |   | 20    |   | 2021      |

FEC Identification Number

C

Transaction ID : B7DC027A70!

Amount of Each Disbursement this Period

307.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HENDERSON, CLARISSA, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
TRAVEL REIMBURSEMENT

002

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04    |   | 20    |   | 2021      |

FEC Identification Number

C

Transaction ID : B4AC08AEB

Amount of Each Disbursement this Period

31.72

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

1261.72

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)

PAGE 392 OF 426

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. HENDERSON, CLARISSA, , ,**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290-6545

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2021

FEC Identification Number

C

Transaction ID : BDA7D3AC8I

Amount of Each Disbursement this Period

922.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. INNOVATIVE EMPLOYEE SOLUTIONS**

Mailing Address 9665 GRANITE RIDGE DR. #420

City  
SAN DIEGO

State  
CA

Zip Code  
92123-2659

Purpose of Disbursement  
SEE MEMO ITEMS

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2021

FEC Identification Number

C

Transaction ID : B96182B00C3

Amount of Each Disbursement this Period

958.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HENDERSON, CLARISSA, , ,**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290-6545

Purpose of Disbursement  
TRAVEL REIMBURSEMENT

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2021

FEC Identification Number

C

Transaction ID : B7980F9E03:

Amount of Each Disbursement this Period

35.69

☒ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

958.19



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 393 OF 426

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. HENDERSON, CLARISSA, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : BCE654A0A8

Amount of Each Disbursement this Period

922.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. INNOVATIVE EMPLOYEE SOLUTIONS**

Mailing Address 9665 GRANITE RIDGE DR. #420

City  
SAN DIEGOState  
CAZip Code  
92123-2659Purpose of Disbursement  
SEE MEMO ITEMS

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 7 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : B1894F26AA1

Amount of Each Disbursement this Period

307.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAGAN, CRYSTAL, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 7 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : B4721ACCE5

Amount of Each Disbursement this Period

307.50

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

307.50

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 394 OF 426

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. INNOVATIVE EMPLOYEE SOLUTIONS**

Mailing Address 9665 GRANITE RIDGE DR. #420

City  
SAN DIEGOState  
CAZip Code  
92123-2659Purpose of Disbursement  
SEE MEMO ITEMS

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : B800A97A68I

Amount of Each Disbursement this Period

1230.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAGAN, CRYSTAL, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : BED0357B59I

Amount of Each Disbursement this Period

307.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HENDERSON, CLARISSA, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

C

Transaction ID : BE7F1E1586

Amount of Each Disbursement this Period

922.50

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1230.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 395 OF 426

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

## **A. INNOVATIVE EMPLOYEE SOLUTIONS**

Mailing Address 9665 GRANITE RIDGE DR. #420

City  
SAN DIEGO

State  
CA

Zip Code  
92123-2659

Purpose of Disbursement  
SEE MEMO ITEMS

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 11 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B320CB37B0

Amount of Each Disbursement this Period

[REDACTED] 1230.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HENDERSON, CLARISSA, , ,**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290-6545

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 11 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B8C0491EC3

Amount of Each Disbursement this Period

[REDACTED] 922.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RAGAN, CRYSTAL, , ,**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290-6545

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 11 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : BA68880C1E

Amount of Each Disbursement this Period

[REDACTED] 307.50

☒ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

[REDACTED] 1230.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 396 OF 426

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. INNOVATIVE EMPLOYEE SOLUTIONS**

Mailing Address 9665 GRANITE RIDGE DR. #420

City  
SAN DIEGOState  
CAZip Code  
92123-2659Purpose of Disbursement  
SEE MEMO ITEMS

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 27    |   | 2021        |

FEC Identification Number

C

Transaction ID : B5A4BF6643I

Amount of Each Disbursement this Period

1230.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAGAN, CRYSTAL, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 18    |   | 2021        |

FEC Identification Number

C

Transaction ID : B2C307E7786

Amount of Each Disbursement this Period

307.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HENDERSON, CLARISSA, , ,**

Mailing Address PO BOX 6545

City  
VISALIAState  
CAZip Code  
93290-6545Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 18    |   | 2021        |

FEC Identification Number

C

Transaction ID : BDDDB030FI

Amount of Each Disbursement this Period

922.50

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1230.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 397 OF 426

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGERState  
CAZip Code  
93657-9102Purpose of Disbursement  
SEE MEMO ITEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04    |   | 08    |   | 2021      |

FEC Identification Number

**C****Transaction ID : BC4C08E70B**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGERState  
CAZip Code  
93657-9102Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04    |   | 08    |   | 2021      |

FEC Identification Number

**C****Transaction ID : B9EB052E14**

Amount of Each Disbursement this Period

1500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGERState  
CAZip Code  
93657-9102Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04    |   | 08    |   | 2021      |

FEC Identification Number

**C****Transaction ID : B7B35EE66A**

Amount of Each Disbursement this Period

600.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

# **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)

PAGE 398 OF 426

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

## **A. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGER

State  
CA

Zip Code  
93657-9102

Purpose of Disbursement  
TRAVEL

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2021

FEC Identification Number

C

Transaction ID : B535CC1E87

Amount of Each Disbursement this Period

6500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGER

State  
CA

Zip Code  
93657-9102

Purpose of Disbursement  
FUNDRAISING EXPENSE

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2021

FEC Identification Number

C

Transaction ID : B4519DD010f

Amount of Each Disbursement this Period

6400.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGER

State  
CA

Zip Code  
93657-9102

Purpose of Disbursement  
SEE MEMO ITEMS

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2021

FEC Identification Number

C

Transaction ID : B225B3C88C

Amount of Each Disbursement this Period

11350.00

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11350.00

# **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)

PAGE 399 OF 426

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

## **A. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGER

State  
CA

Zip Code  
93657-9102

Purpose of Disbursement  
FUNDRAISER FOOD & BEVERAGE

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2021

FEC Identification Number

C

Transaction ID : B864AD9741

Amount of Each Disbursement this Period

6450.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGER

State  
CA

Zip Code  
93657-9102

Purpose of Disbursement  
TRAVEL

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2021

FEC Identification Number

C

Transaction ID : BB4BAEAF26

Amount of Each Disbursement this Period

3900.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGER

State  
CA

Zip Code  
93657-9102

Purpose of Disbursement  
COMPLIANCE CONSULTING

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2021

FEC Identification Number

C

Transaction ID : B9AD4B2A2:

Amount of Each Disbursement this Period

400.00

☒ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 400 OF 426

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGERState  
CAZip Code  
93657-9102Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 05    |   | 2021      |

FEC Identification Number

C Transaction ID : BB313EA2DC

Amount of Each Disbursement this Period

600.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGERState  
CAZip Code  
93657-9102Purpose of Disbursement  
SEE MEMO ITEMSCategory/  
Type

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 04    |   | 2021      |

FEC Identification Number

C Transaction ID : B58C51283C1

Amount of Each Disbursement this Period

24500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGERState  
CAZip Code  
93657-9102Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Category/  
Type

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 04    |   | 2021      |

FEC Identification Number

C Transaction ID : B096D65461

Amount of Each Disbursement this Period

24500.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

24500.00



# **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)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. RIVER RIGHT LLC**

Mailing Address 205 TROUT LAKE

City  
SANGER

State  
CA

Zip Code  
93657-9102

Purpose of Disbursement  
TRAVEL

Candidate Name

002

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 04 / 2021

FEC Identification Number

C

Transaction ID : B4BF54B5AC

Amount of Each Disbursement this Period

18250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

58297.41

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 402 OF 426

|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. HUDSON FOR CONGRESS**

Mailing Address PO BOX 5053

City  
CONCORDState  
NCZip Code  
28027Purpose of Disbursement  
IN KIND TRAVEL EXPENSES AMENDED PORTION OF AIRFARE/HOTEL

Candidate Name

**HUDSON, RICHARD L., JR., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC

District: 08

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00504522**Transaction ID : BE80F67274f**

Amount of Each Disbursement this Period

2643.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALASKANS FOR DON YOUNG INC.**

Mailing Address 2504 FAIRBANKS ST

City  
ANCHORAGEState  
AKZip Code  
99503Purpose of Disbursement  
CONTRIBUTION -P22

Candidate Name

**YOUNG, DONALD, E., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AK

District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00012229**Transaction ID : B914AF4067f**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANN WAGNER FOR CONGRESS**

Mailing Address PO BOX 50

City  
BALLWINState  
MOZip Code  
63022Purpose of Disbursement  
CONTRIBUTION -P22

Candidate Name

**WAGNER, ANN, L., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO

District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00495846**Transaction ID : B87006B50E**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 403 OF 426

|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. ARMSTRONG FOR CONGRESS**Mailing Address 1515 BURNT BOAT DRIVE  
BOX 112City  
BISMARCKState  
NDZip Code  
58503Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**ARMSTRONG, KELLY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: ND District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00670547**Transaction ID : BF37FEA609**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ASHLEY HINSON FOR CONGRESS**

Mailing Address PO BOX 811

City  
MARIONState  
IAZip Code  
52302Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**ARENHOLZ, ASHLEY, HINSON, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: IA District: 01

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00706267**Transaction ID : B3D2DBED7E**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AUGUST PFLUGER FOR CONGRESS**

Mailing Address PO BOX 3530

City  
SAN ANGELOState  
TXZip Code  
76902-3530Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**PFLUGER, AUGUST, LEE, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 11

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00719294**Transaction ID : B7CBC88AD**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 404 OF 426

|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. BALDERSON FOR CONGRESS**

Mailing Address 4679 WINTERSET DR

City  
COLUMBUSState  
OHZip Code  
43220Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**BALDERSON, WILLIAM, TROY, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2022

☒

Primary

☐

General

☐

Other (specify) ▼

State: OH

District: 12

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00662650**Transaction ID : B81167AC61I**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BEN CLINE FOR CONGRESS, INC.**

Mailing Address PO BOX 1790

City  
HARRISONBURGState  
VAZip Code  
22803-1790Purpose of Disbursement  
CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY

011

Category/  
Type

Candidate Name

**CLINE, BENJAMIN, LEE, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2022

☒

Primary

☐

General

☐

Other (specify) ▼

State: VA

District: 06

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00661561**Transaction ID : B4B262555D4**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BETH VAN DUYNE FOR CONGRESS**

Mailing Address PO BOX 630167

City  
IRVINGState  
TXZip Code  
75063Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**VAN DUYNE, ELIZABETH, ANN, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2022

☒

Primary

☐

General

☐

Other (specify) ▼

State: TX

District: 24

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00714865**Transaction ID : B8EAD5E7A:**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 405 OF 426

|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. BICE FOR CONGRESS**

Mailing Address PO BOX 21315

City  
OKLAHOMA CITYState  
OKZip Code  
73156Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**BICE, STEPHANIE, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OK District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00703843**Transaction ID : B14BB8EF2B**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLAINE FOR CONGRESS**

Mailing Address PO BOX 98

City  
ST. ELIZABETHState  
MOZip Code  
65075Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**LUETKEMEYER, W, BLAINE, ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify)

State: MO District: 03

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00458679**Transaction ID : B267B40793E**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BRIAN FITZPATRICK FOR CONGRESS**

Mailing Address PO BOX 939

City  
LANGHORNEState  
PAZip Code  
19047Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**FITZPATRICK, BRIAN, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 01

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00607416**Transaction ID : BDC61598DE**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. BUDDY CARTER FOR CONGRESS**

Mailing Address PO BOX 10570

City  
SAVANNAHState  
GAZip Code  
31412Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**CARTER, EARL, LEROY, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 01

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 19    | / | 2021      |

FEC Identification Number

**C** C00543967**Transaction ID : B5DCA208E2**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CARLOS GIMENEZ FOR CONGRESS**

Mailing Address 1421 SW 107TH AVE #236

City  
MIAMIState  
FLZip Code  
33174Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**GIMENEZ, CARLOS, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: FL District: 26

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 19    | / | 2021      |

FEC Identification Number

**C** C00735985**Transaction ID : B6755D6615A**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAROL FOR CONGRESS**

Mailing Address 228 S. WASHINGTON STREET

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**MILLER, CAROL, DEVINE, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WV District: 03

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 19    | / | 2021      |

FEC Identification Number

**C** C00653220**Transaction ID : BBEAB41C8**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. CATHY MCMORRIS RODGERS FOR CONGRESS**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

Mailing Address BOX 137

City  
SPOKANEState  
WAZip Code  
99210Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**MCMORRIS RODGERS, CATHY, , ,**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 05

FEC Identification Number

**C** C00390476**Transaction ID : BE040D3D56**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CLAUDIA TENNEY FOR CONGRESS**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

Mailing Address PO BOX 244

City  
CLINTONState  
NYZip Code  
13323-0244Purpose of Disbursement  
AMEND SOFTWARE GLITCH DID NOT CONNECT CANDIDATE  
PROPERLY AND ELECTION UPDATED

011

Candidate Name

**TENNEY, CLAUDIA, , ,**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: NY District: 22

FEC Identification Number

**C** C00632828**Transaction ID : BD65CBF3E1**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CURTIS FOR CONGRESS**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

Mailing Address 370 E SOUTH TEMPLE  
STE 580City  
SALT LAKE CITYState  
UTZip Code  
84111-1349Purpose of Disbursement  
CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY

011

Candidate Name

**CURTIS, JOHN, , ,**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: UT District: 03

FEC Identification Number

**C** C00647339**Transaction ID : B8DF07755B**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID ROUZER FOR CONGRESS**

Mailing Address PO BOX 3142

City  
WILMINGTONState  
NCZip Code  
28406Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**ROUZER, DAVID CHESTON MR., , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC

District: 07

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00501643**Transaction ID : BFEB45B7A3**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEBBIE LESKO FOR CONGRESS**

Mailing Address PO BOX 45388

City  
PHOENIXState  
AZZip Code  
85064Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**LESKO, DEBBIE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ

District: 08

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00663914**Transaction ID : B9504674AC/**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DJOU FOR HAWAII**

Mailing Address PO BOX 235280

City  
HONOLULUState  
HIZip Code  
96823Purpose of Disbursement  
VOID OF 02/03/2010 CONTRIBUTION

011

Candidate Name

**DJOU, CHARLES KONG, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: HI

District: 01

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 3 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00441451**Transaction ID : B082063152/**

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. DON BACON FOR CONGRESS**

Mailing Address PO BOX 391368

City  
OMAHAState  
NEZip Code  
68139Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**BACON, DONALD, J, ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NE District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00575167**Transaction ID : B1892F71709**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DREW FERGUSON FOR CONGRESS INC.**

Mailing Address PO BOX 71067

City  
NEWNANState  
GAZip Code  
30271Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**FERGUSON, ANDERSON DREW IV, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify)

State: GA District: 03

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00607838**Transaction ID : B82A288B607**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FALLON FOR CONGRESS**

Mailing Address PO BOX 614

City  
CELINAState  
TXZip Code  
75009Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**FALLON, PATRICK, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 04

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00750307**Transaction ID : B5701BC3FC**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. FISCHBACH FOR CONGRESS**

Mailing Address PO BOX 190

City  
LITCHFIELDState  
MNZip Code  
55355Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**FISCHBACH, MICHELLE, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2022

☒

Primary

☐

General

☐

Other (specify) ▼

State: MN

District: 07

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00717959**Transaction ID : B00D96E1E8**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRENCH HILL FOR ARKANSAS**

Mailing Address PO BOX 7841

City  
LITTLE ROCKState  
ARZip Code  
72217Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**HILL, JAMES, FRENCH, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2022

☒

Primary

☐

General

☐

Other (specify)

State: AR

District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00551275**Transaction ID : B20862A11Cf**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DAVE JOYCE**

Mailing Address 9856 ARCHER LN

City  
DUBLINState  
OHZip Code  
43017Purpose of Disbursement  
AMENDED SOFTWARE GLITCH DID NOT CONNECT CANDIDATE  
PROPERLY AND ELECTION UPDATED

011

Category/  
Type

Candidate Name

**JOYCE, DAVID, P., ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2022

☒

Primary

☐

General

☐

Other (specify) ▼

State: OH

District: 14

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00527457**Transaction ID : BC357D22FC**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DAVID SCHWEIKERT**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 21    |   | 2021      |

Mailing Address 8175 E EVANS RD  
UNIT 13176City  
SCOTTSDALEState  
AZZip Code  
85267-4907Purpose of Disbursement  
CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY AND ELECTION UPDATED

011

Candidate Name

**SCHWEIKERT, DAVID, S., ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 06

FEC Identification Number

C C00540617

Transaction ID : B26EB8E4BE

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF HAGEDORN**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 19    |   | 2021      |

Mailing Address 201 SIOUX RD  
STE 107City  
MANKATOState  
MNZip Code  
56001Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**HAGEDORN, JAMES, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: MN District: 01

FEC Identification Number

C C00550707

Transaction ID : B506E916C87

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 19    |   | 2021      |

Mailing Address PO BOX 1131

City  
GREENVILLEState  
NCZip Code  
27835Purpose of Disbursement  
AMENDED SOFTWARE GLITCH DID NOT CONNECT CANDIDATE  
PROPERLY

011

Candidate Name

**MURPHY, GREGORY, FRANCIS, DR.,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 03

FEC Identification Number

C C00697649

Transaction ID : B5E5976BE4

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. GARBARINO FOR CONGRESS**

Mailing Address PO BOX 101

City  
BAYPORTState  
NYZip Code  
11705Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**GARBARINO, ANDREW, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 19    | / | 2021        |

FEC Identification Number

**C** C00729954**Transaction ID : BA6A830C95**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HERN FOR CONGRESS**Mailing Address 9521-B RIVERSIDE PKWY  
#350City  
TULSAState  
OKZip Code  
74137Purpose of Disbursement  
AMENDED SOFTWARE GLITCH DID NOT CONNECT CANDIDATE  
PROPERLY

011

Category/  
Type

Candidate Name

**HERN, KEVIN, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OK District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 19    | / | 2021        |

FEC Identification Number

**C** C00636092**Transaction ID : B64DEEF4D2**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUDSON FOR CONGRESS**

Mailing Address PO BOX 5053

City  
CONCORDState  
NCZip Code  
28027Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**HUDSON, RICHARD L., JR., ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 08

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 19    | / | 2021        |

FEC Identification Number

**C** C00504522**Transaction ID : B9D516414B**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 413 OF 426

|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. JASON SMITH FOR CONGRESS**

Mailing Address PO BOX 1324

City  
CAPE GIRARDEAUState  
MOZip Code  
63702Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**SMITH, JASON, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 08

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 21    |   | 2021        |

FEC Identification Number

**C** C00541862**Transaction ID : B984FC5D11:**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOE WILSON FOR CONGRESS**

Mailing Address PO BOX 2145

City  
WEST COLUMBIAState  
SCZip Code  
29171Purpose of Disbursement  
CONTRIBUTION -P22 VOIDED REISSUED

011

Candidate Name

**WILSON, JOE THE, HON., ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: SC District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 21    |   | 2021        |

FEC Identification Number

**C** C00368522**Transaction ID : BE822ABFC2**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JOHN CARTER FOR CONGRESS**

Mailing Address 200 UNIV. OAKS BLVD, STE 225 #130

City  
ROUND ROCKState  
TXZip Code  
78665Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**CARTER, JOHN R., REP., ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 31

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 19    |   | 2021        |

FEC Identification Number

**C** C00371203**Transaction ID : B77FB21E2C**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. KANSANS FOR LATURNER**

Mailing Address PO BOX 67237

City  
TOPEKAState  
KSZip Code  
66667Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**LATURNER, JAKE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: KS

District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00718346**Transaction ID : BFDC223081**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KAY GRANGER CAMPAIGN FUND**Mailing Address 1701 RIVER RUN  
STE 308City  
FORT WORTHState  
TXZip Code  
76107-6547Purpose of Disbursement  
CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY

011

Candidate Name

**GRANGER, KAY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX

District: 12

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00310532**Transaction ID : B3625B08C6f**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KINZINGER FOR CONGRESS**

Mailing Address PO BOX 1050

City  
BOURBONNAISState  
ILZip Code  
60914Purpose of Disbursement  
VOID OF 02/03/2010 CONTRIBUTION UNCASHED

011

Candidate Name

**KINZINGER, ADAM, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL

District: 16

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 3 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00458877**Transaction ID : BF1F50DD44**

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. LAHOOD FOR CONGRESS**

Mailing Address P.O. BOX 10735

City  
PEORIAState  
ILZip Code  
61612

Purpose of Disbursement

CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY AND ELECTION UPDATED

Candidate Name

**LAHOOD, DARIN, MCKAY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 18

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00575050**Transaction ID : B0D99FF254!**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LATTA FOR CONGRESS**

Mailing Address PO BOX 106

City  
BOWLING GREENState  
OHZip Code  
43402

Purpose of Disbursement

CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY AND ELECTION UPDATED

Candidate Name

**LATTA, ROBERT, EDWARD, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH

District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00438697**Transaction ID : B16E65B914E**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LOUDERMILK FOR CONGRESS**

Mailing Address PO BOX 447

City  
CASSVILLEState  
GAZip Code  
30123

Purpose of Disbursement

CONTRIBUTION -P22

Candidate Name

**LOUDERMILK, BARRY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA

District: 11

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00543892**Transaction ID : B8485CD4CE**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. MANN FOR CONGRESS**

Mailing Address PO BOX 1084

City  
SALINAState  
KSZip Code  
67402Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**MANN, TRACEY, ROBERT, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KS District: 01

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00460659**Transaction ID : BCA488E4FC**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAST FOR CONGRESS**

Mailing Address PO BOX 3016

City  
STUARTState  
FLZip Code  
34995Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**MAST, BRIAN, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: FL District: 18

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00632257**Transaction ID : BD9D81B194**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCCAUL FOR CONGRESS, INC**Mailing Address 815 BRAZOS ST  
STE ACity  
AUSTINState  
TXZip Code  
78701-2514Purpose of Disbursement  
AMENDED SOFTWARE GLITCH DID NOT CONNECT CANDIDATE  
PROPERLY  
Candidate Name

011

**MCCAUL, MICHAEL, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 10

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00392688**Transaction ID : B1D0D15588**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 417 OF 426

|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. MICHELLE STEEL FOR CONGRESS**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

Mailing Address 92A SURFSIDE AVENUE, #472

City  
SURFSIDEState  
CAZip Code  
90743Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**STEEL, MICHELLE, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 48

FEC Identification Number

C C00704981

**Transaction ID : BD8F6A45D3**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE BOST FOR CONGRESS COMMITTEE**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

Mailing Address PO BOX 1212

City  
MURPHYSBOROState  
ILZip Code  
62966Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**BOST, MICHAEL J, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 12

FEC Identification Number

C C00546499

**Transaction ID : BABF422928f**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE GARCIA FOR CONGRESS**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

Mailing Address 9070 IRVINE CENTER DRIVE #150

City  
IRVINEState  
CAZip Code  
92618Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**GARCIA, MICHAEL, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 25

FEC Identification Number

C C00701102

**Transaction ID : B2196682E7f**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. MIKE KELLY FOR CONGRESS**

Mailing Address PO BOX 476

City  
LYNDORAState  
PAZip Code  
16045Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**KELLY, GEORGE J JR, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 03

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00474189**Transaction ID : B6ACA2D8B**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MILLER-MEEKS FOR CONGRESS**

Mailing Address PO BOX 33

City  
OTTUMWAState  
IAZip Code  
52501Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**MILLER-MEEKS, MARIANNETTE JANE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA

District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00558825**Transaction ID : B3E16A62381**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MORGAN GRIFFITH FOR CONGRESS**

Mailing Address PO BOX 361

City  
CHRISTIANSBURGState  
VAZip Code  
24068Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**GRIFFITH, H MORGAN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District: 09

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00477240**Transaction ID : BC1053FE9A**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. MULVANEY FOR CONGRESS**

Mailing Address P.O. BOX 1975

City  
LANCASTERState  
SCZip Code  
29721Purpose of Disbursement  
VOID OF 10/12/2010 CONTRIBUTION AMENDED CANDIDATE  
CONNECTION  
Candidate Name**MULVANEY, JOHN, MICHAEL, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 3 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00471292**Transaction ID : B972F78DC3**

Amount of Each Disbursement this Period

- 2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NEHLS FOR CONGRESS**

Mailing Address PO BOX 16968

City  
SUGAR LANDState  
TXZip Code  
77496Purpose of Disbursement  
CONTRIBUTION -P22

Candidate Name

**NEHLS, TROY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: TX District: 22

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00730150**Transaction ID : B63E333AB8**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NICOLE FOR NEW YORK**

Mailing Address PO BOX 60487

City  
STATEN ISLANDState  
NYZip Code  
10306Purpose of Disbursement  
CONTRIBUTION -P22

Candidate Name

**MALLIOTAKIS, NICOLE, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00694778**Transaction ID : B9E313CABI**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

# **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)

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☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

## **A. PATRIOTS FOR PERRY**

Mailing Address PO BOX 633

City  
NEW CUMBERLAND

State  
PA

Zip Code  
17070

Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**PERRY, SCOTT, , ,**

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 10

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2021

FEC Identification Number

**C** C00510164

**Transaction ID : B03584977B**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PETE STAUBER FOR CONGRESS**

Mailing Address 23 W CENTRAL ENTRANCE  
# 333

City  
DULUTH

State  
MN

Zip Code  
55811-3433

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Candidate Name

**STAUBER, PETE, , ,**

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify)

State: MN District: 08

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2021

FEC Identification Number

**C** C00650697

**Transaction ID : B871C4BAEE**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ROB WITTMAN FOR CONGRESS**

Mailing Address PO BOX 427

City  
ALEXANDRIA

State  
VA

Zip Code  
22313

Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**WITTMAN, ROBERT J., , ,**

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2021

FEC Identification Number

**C** C00441014

**Transaction ID : BEE65F5AB**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. RODNEY FOR CONGRESS**

Mailing Address PO BOX 344

City  
TAYLORVILLEState  
ILZip Code  
62568Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**DAVIS, RODNEY, L, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00521948**Transaction ID : B7E3A41529**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RON ESTES FOR CONGRESS**

Mailing Address PO BOX 782952

City  
WICHITAState  
KSZip Code  
67278Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**ESTES, RON, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: KS District: 04

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00632067**Transaction ID : B869F5B988E**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SALAZAR FOR CONGRESS**

Mailing Address PO BOX 431332

City  
MIAMIState  
FLZip Code  
33243Purpose of Disbursement  
CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY

011

Category/  
Type

Candidate Name

**SALAZAR, MARIA, ELVIRA, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 27

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00714261**Transaction ID : B07C9B3DC**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

## **A. SCOTT FRANKLIN FOR CONGRESS**

Mailing Address PO BOX 2811

City  
LAKELAND

State  
FL

Zip Code  
33806

Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**FRANKLIN, SCOTT, MR., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL

District: 15

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 19 / 2021

FEC Identification Number

C C00742247

**Transaction ID : B31ADB15C7**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SMUCKER FOR CONGRESS**

Mailing Address 824 S MILLEDGE AVE  
STE 101

City  
ATHENS

State  
GA

Zip Code  
30605

Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**SMUCKER, LLOYD K, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify)

State: PA

District: 16

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2021

FEC Identification Number

C C00599464

**Transaction ID : BD519D01283**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TEXANS FOR JODEY ARRINGTON**

Mailing Address PO BOX 6687

City  
LUBBOCK

State  
TX

Zip Code  
79493

Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**ARRINGTON, JODEY, COOK, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX

District: 19

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 19 / 2021

FEC Identification Number

C C00588657

**Transaction ID : BB0A9E5070**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. TODOS CON JENNIFFER INC. DBA JENNIFFER FOR CONGRESS**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 19    | / | 2021      |

Mailing Address PO BOX 367111

City  
SAN JUANState  
PRZip Code  
00936Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**GONZALEZ COLON, JENNIFFER, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PR District: 00

FEC Identification Number

**C** C00588392**Transaction ID : B9C960DF8A**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TONY GONZALES FOR CONGRESS**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 19    | / | 2021      |

Mailing Address 14439 NW MILITARY HWY  
STE 108City  
SHAVANO PARKState  
TXZip Code  
78231-1648Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**GONZALES, ERNEST ANTHONY TONY, II, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 23

FEC Identification Number

**C** C00706614**Transaction ID : B62CB1C377I**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VAN DREW FOR CONGRESS**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 21    | / | 2021      |

Mailing Address PO BOX 671

City  
CAPE MAY COURT HOUSEState  
NJZip Code  
08210Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**VAN DREW, JEFF, MR, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 02

FEC Identification Number

**C** C00661868**Transaction ID : BCB7618551**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. VAN TAYLOR CAMPAIGN**Mailing Address 1900 PRESTON RD  
STE 267City  
PLANOState  
TXZip Code  
75093-3604Purpose of Disbursement  
CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY

Candidate Name

**TAYLOR, NICHOLAS, VAN, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 03

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00653634**Transaction ID : B3DC8E16DE**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VICTORIA SPARTZ FOR CONGRESS**

Mailing Address PO BOX 505

City  
NOBLESVILLEState  
INZip Code  
46061Purpose of Disbursement  
CONTRIBUTION -P22

Candidate Name

**SPARTZ, VICTORIA, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify)

State: IN District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00737767**Transaction ID : B9D4B7B3DA**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VIRGINIA FOXX FOR CONGRESS**

Mailing Address PO BOX 2676

City  
BOONEState  
NCZip Code  
28607-2676Purpose of Disbursement  
P22 AMENDED SOFTWARE GLITCH DID NOT CONNECT CANDIDATE  
PROPERLY

Candidate Name

**FOXX, VIRGINIA, ANN, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00386748**Transaction ID : B9FF040161**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. WALORSKI FOR CONGRESS INC**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 21    |   | 2021      |

Mailing Address PO BOX 954

City  
MISHAWAKAState  
INZip Code  
46546Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**WALORSKI (SWIHART), JACKIE, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 02

FEC Identification Number

**C** C00468579**Transaction ID : B3801D89CB**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WENSTRUP FOR CONGRESS**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 21    |   | 2021      |

Mailing Address PO BOX 9551

City  
CINCINNATIState  
OHZip Code  
45209-0551Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**WENSTRUP, BRAD, DR., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 02

FEC Identification Number

**C** C00497818**Transaction ID : BD636304B5f**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WESTERMAN FOR CONGRESS**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 21    |   | 2021      |

Mailing Address PO BOX 21097

City  
HOT SPRINGSState  
ARZip Code  
71903Purpose of Disbursement  
CONTRIBUTION -P22

011

Candidate Name

**WESTERMAN, BRUCE, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AR District: 04

FEC Identification Number

**C** C00548180**Transaction ID : B08DD41DD:**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 426 OF 426

|                              |                              |                                        |                             |                              |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. YOUNG KIM FOR CONGRESS**

Mailing Address PO BOX 2186

City  
FULLERTONState  
CAZip Code  
92837Purpose of Disbursement  
CONTRIBUTION -P22

011

Category/  
Type

Candidate Name

**KIM, YOUNG, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 39

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00665638**Transaction ID : BE9A5685A5**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. YVETTE4CONGRESS**Mailing Address 1111 10TH ST  
# 404City  
ALAMOGORDOState  
NMZip Code  
88310Purpose of Disbursement  
CONTRIBUTION -P22 AMENDED SOFTWARE GLITCH DID NOT  
CONNECT CANDIDATE PROPERLY

011

Category/  
Type

Candidate Name

**HERRELL, STELLA, YVETTE, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NM

District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 1 |   |   |

FEC Identification Number

**C** C00655571**Transaction ID : B4879803C0E**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5000.00

**TOTAL** This Period (last page this line number only)..... ►

172000.00