2022 - 02 - 08 - 08 - 00 mg 00 co 2

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2022 FEB - 3 PH 1: 27

1. NAME OF COMMITTEE (in full)	PRINT Y		r the lines.	ing, type	12FE4M	5	•
PILIPINO AMERICAN LOS	ANGELES PEMO	CRATS L			1111		_1	
	1 1 1 1 1	<u> </u>				<u> </u>		· · · · · · · · ·
ADDRESS (number and st	reet) 2 3 2	5 TRICK	LING C	REEK D	RIVE,			
Check if differer than previously reported. (ACC)	17 8 17	ERNE				CA [91750]-[1363]
2. FEC IDENTIFICATI	ON NUMBER	•	CITY A		. S	STATE A	ZIP C	CODE A
C 0 0 7 5 3 9	3 9	3	3. IS THIS REPORT		NEW (N) OR	AM (A)	ENDED .	
4. TYPE OF REPOI (Choose One)	Re Du	nthly port e On:	Feb 20 (M2) Mar 20 (M3)	52 (7)	May 20 (M5) Jun 20 (M6)		20 (M8) 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Report April 15 Quarterly Re July 15 Quarterly Re October 15 Quarterly Re January 31 Year-End Re July 31 Mid	eport (Q1) (c) eport (Q2) eport (Q3) eport (YE)			Primary (12 Convention	, t	General (
Report (Nor Year Only) Termination (TER)	n-election (MY)	30-Day POST-Electic Report for th		General (30		Runoff (3	in the	
5. Covering Period	07 01	D / 2021		through	M→ M→	30	2021]
I certify that I have exam			-	wledge and	belief it is true	e, correct and	complete.	
Type or Print Name of Treasurer NOTE: Submission of false	Emr	NA HILARIO Complete inform	Lario	ubject the pe		ate 09	/ 15 /	2021 52 U.S.C. § 30109.
Office Use Only							FEC FO Rev. 05	RM 3X

$2022 \cdot 02 \cdot 08 \cdot 08 \cdot 00890808$

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name PILIPINO AMERICAN LOS ANGELES DEMOCRATS Report Covering the Period: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

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

2020 + 02 + 08 + 0M + 00M90804

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Write or Type Committee Name PILIPINO AMERICAN LOS ANGELES DEMOCRATS LMANUAL V (LOLALON) V (LANCANA 0 0 / 2021 30 2021 Report Covering the Period: To: From: 0,1 **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 2 5 0 ... 2,5,0,.00 0 0 (i) Itemized (use Schedule A)..... $7^\circ_15^\circ_{5,\infty}$ $0_{15}^\circ_{0,13}^\circ_{13}$ (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)...... (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0 0 Party Committees..... 13. All Loans Received 0 0 14 Loan Repayments Received...... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0 Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 0 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0 (from Schedule H3)..... 0 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).......▶

0 9

20. Total Federal Receipts (subtract Line 18(c) from Line 19).......▶

7 5 3 1

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	(paragramum paragram, may a sumain and sumai	F= (F= (F= (F= (F= (F= (F= (F= (F= (F= (
	(i) Federal Share		
	(ii) Non-Federal Share	0	0
	(b) Other Federal Operating		
	Expenditures	5 0 3 . 5 0	6 1 2 . 5 4
	(c) Total Operating Expenditures		
22	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party		<u> </u>
	Committees	0	0
23.	Contributions to Federal Candidates/Committees		
	and Other Political Committees	0	On in one a law on the comme
24.	Independent Expenditures		
25 .	(use Schedule E) Coordinated Party Expenditures	0	
	(52 U.S.C. § 30116(d)) (use Schedule F)	0	(0
	· ,		
26 .	Loan Repayments Made	0	0
	Loans Made Refunds of Contributions To:		$\begin{bmatrix} 0 & 0 & 0 & 0 & 0 & 0 \end{bmatrix}$
	(a) Individuals/Persons Other Than Political Committees	0	0
	(b) Political Party Committees	10	0
	(c) Other Political Committees	المساحة مساحة معرف المساوية ا	
	(such as PACs)	0	0
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))		0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
29.	Other Disbursements (Including		ر پاستان در
	Non-Federal Donations)		
30.	Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity		Management to the contract of
	(from Schedule H6)		
	(i) Federal Share	0	
	(ii) III ovin'i Choro		
	(ii) "Levin" Share(b) Federal Election Activity Paid	$[0, \dots, 0, \dots, 0, \dots, 0, \dots, 0, \dots, 0, \dots]$	0,
	Entirely With Federal Funds		Pi O
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0	0
32	Total Federal Disbursements		المستوال المستوال المناط والمناط المستوال المستوال المستوال المستوال المستوال المستوال المستوال المستوال المستوال
JŁ.	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	5,0,3,5,0,	6 1 2 . 5 4
	•	Maria Maria Compression and	

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)	•	Page 5
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7 2 5, . 1 0,	4 0 9 9 . 2 1
34. Total Contribution Refunds (from Line 28(d))	0	0
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	7.25, Da	01089,21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5 0 3 5 0	6,1,2,,,5,4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5 0 3 . 5 0	6 1 2 . 5 4

SCHEDULE	Α	(FEC	Form	3X)
ITEMIZED R	EC	EIPTS	;	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF1			
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12			
		13 14 15 16 17			
Any information copied from such Reports and Stat or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
PILIPINO AMERICAN LOS ANGELES					
Full Name of Individual (Last, First, Middle Initial A. MEGAN HALL	l) or Full Organization Name	Date of Receipt			
Mailing Address 2226 HALL PLACE NW		08 24 2021			
City WASHINGTON	State Zip Code DC 20007	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C				
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
Full Name of Individual (Last, First, Middle Initial B.	s) or Full Organization Name	Date of Receipt			
Mailing Address		መቀጠ / ወ ያው / የሞናውና			
City	State Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	7 110 110 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Name of Employer (for Individual)	Occupation (for Individual) CONSULTANT	Memo Item			
	Aggregate Year-to-Date ▼				
Primary ☐ General Other (specify) ▼					
Full Name of Individual (Last, First, Middle Initial	l) or Full Organization Name	Date of Receipt			
Mailing Address		LW2W3 \ LD2D3 \ LA2A2A2AA			
City	State Zip Code CA	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼				
SUBTOTAL of Receipts This Page (optional)		,_1_1_,_1,,			
TOTAL This Period (last page this line number on	iy)				

SCHEDULE B (FEC FOIII 3X)	Hoo concrete askedule (-)	FOR LINE I	NUMBER: PAGE 1 OF 1
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 23 26 27
	Detailed Summary Page	28a	28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
) PILIPINO AMERICAN LOS ANGELES D	EMOCRATS		
Full Name (Last, First, Middle Initial)			
A. EMMA HILARIO	•	.	Date of Disbursement
Mailing Address 2325 TRICKLING CREEK DRIVE	•		08 07 2021
City	State Zip Code		FEC Identification Number
LÁ VERNE, CA 91750	CA 91750		
Purpose of Disbursement POSTAGE FOR MAILING	T	0 0 1	<u>C</u>
Candidate Name		Category/	Amount of Each Disbursement this Period
		Туре	
Office Sought: House Disburserr	nent For: Primary General		
	Other (specify) ▼		Mome Item
State: District:			Memo Item
Full Name (Last, First, Middle Initial)			Date of Disharana
B. CENTER FOR EMPOWERED POLITICS		ļ	Date of Disbursement
Mailing Address	1		09 21 2021
	State Zip Code		FEC Identification Number
Purpose of Disbursement			C
POSTAGE FOR MAILING REPORTS	001		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	.,,,,,	5 0 0 . 0 0
	Primary General		Control Contro
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
C. (2007)			Date of Disbursement
Mailing Address		•	MAMA (LOZO) LAAAAAA
Mailing Address			
City	State Zip Code		FEC Identification Number
Purpose of Disbursement			C
Candidate Name	Amount of Each Disbursement this Period		
Office Sought: House Disbursem		Туре	
	Primary General		
⊢	Other (specify) ▼		Memo Item
Dianet.	<u> </u>		
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	5.0.3,5.0,
TOTAL This Period (last page this line number only).		·····•	5 0 3, . 5 0,

SCHEDULE C (FEC Form 3X) **LOANS**

Use separate schedule(s) for each category of the

PAGE OF

FOR LINE 13 OF FORM 3X **Detailed Summary Page** NAME OF COMMITTEE (In Full) PILIPINO AMERICAN LOS ANGELES DEMOCRATS Election: ☐ Memo Item LOAN SOURCE Full Name (Last, First, Middle Initial) Primary NONE TO REPORT General Mailing Address Other (specify) ▼ ZIP Code City State Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period TERMS Date Incurred Date Due Interest Rate Secured: Yes No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code **Amount** Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code **Amount** Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding SUBTOTALS This Period This Page (optional)..... TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page i of Schedule C

ederal Election Commission, Washington, D.C. 20463		
NAME OF COMMITTEE (IN FUII) PILIPINO AMERICAN LOS ANGELES DEMOCR	RATS	FEC IDENTIFICATION NUMBER
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name [.]	 	
NONE TO REPORT Mailing Address		<u></u> %
Walling Address		Man / Dad / Addadad
City State Zip Code	Date Incurred or Established Date Due	MAM / DAD / AAAAA
A. Has loan been restructured? No Yes	If yes, date originally incurred	M-2M- / D-2D- / V-2-4-2-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-
B. If line of credit,	Total	
Amount of this Draw:	Outstanding Balance:	
C. Are other parties secondarily liable for the debt incurr	red?	
	ust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of	The second of th	What is the value of this collateral?
stocks, accounts receivable, cash on deposit, or other		
No Yes If yes, specify:	<u> </u>	
		Does the lender have a perfected security interest in it? No Yes
Are any future contributions or future receipts of interest collateral for the loan? No Yes If yes, s		What is the estimated value?
	Location of account:	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account.	
Date account established:	Address:	
MAM / DAD / AAAAAA	City, State, Zip:	
F. If neither of the types of collateral described above wa the loan amount, state the basis upon which this loan	as pledged for this loan, or if the an was made and the basis on which	mount pledged does not equal or exceed the it assures repayment.
G. COMMITTEE TREASURER	,	DATE
Typed Name	" " - " - " - " - " - " - " - " - " - "	Many / Long / Long And
Signature		
H. Attach a signed copy of the loan agreement.		
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the te	erms of the loan and other informs	ation regarding the extension of the loan
are accurate as stated above.		
 The loan was made on terms and conditions (in similar extensions of credit to other borrowers of 	icluding interest rate) no more favo f comparable credit worthiness.	orable at the time than those imposed for
III. This institution is aware of the requirement that complied with the requirements set forth at 11 C	a loan must be made on a basis	which assures repayment, and has g this loan.
AUTHORIZED REPRESENTATIVE		DATE
Typed Name		Mam / 1020 / 1000 A
Signature Tit	tle	
i	•	i l

CHEDULE D (FEC Form 3X) EBTS AND OBLIGATIONS			(Use separate schedule(s) for each	PAGE 1 OF1 FOR LINE NUMBER: (check only one)	
xcluding Loans			numbered line)	10	
NAME OF COMMITTEE (In Full)					
PILIPINO AMERICAN LOS ANGELES	DEMOC	RATS			
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of	Debt (Purpose):	
NONE TO REPO	ORT				
Mailing Address					
City	State	Zip Code			
Outstanding Balance Beginning This Period					
Culturally Salaries Esgirming This Felica					
			•		
Amount Incurred This Period	P.	ayment This Period	Outstand	ling Balance at Close of This Period	
				<u></u>	
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		I Nature of	Debt (Purpose):	
B. Full Name (Last, Flist, Middle Illitial) of Debior	or Creditor		Nature of	Deut (Fuipose).	
Mailing Address					
City	State	Zip Code			
		<u> </u>			
Outstanding Balance Beginning This Period					
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			·		
Amount Ingured This Poried	0	aumant This Deried	Outstand	ting Palance at Class of This Parios	
Amount Incurred This Period		ayment This Period	Odisiano	ding Balance at Close of This Period	
		- 5 - 6 - 6 - 5 · 5 · 5 · 5 · 5 · 5 · 5 · 5 · 5 · 5		Baral 17 and 18 and 18 and 18 and 18 and 18 and 18 and	
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of	Debt (Purpose):	
, , , , , , , , , , , , , , , , , , , ,			1,44,67,0	(, w.pass).	
Mailing Address					
City .	State	Zıp Code			
		1			
Outstanding Balance Beginning This Period	<del></del>				
				•	
Amount Inquired This Desired		nument This Design	Outotoo	ting Polonog at Class of This Paris	
Amount Incurred This Period	۲.	ayment This Period	Ouisiand	ting Balance at Close of This Period	
			ــا لـــ		
		·			
1) SUBTOTALS This Period This Page (optional)		•••••			
<ol><li>TOTALS This Period (last page this line number</li></ol>	only)	••••••	▶	<u> </u>	

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

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

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
PILIPINO AMERICAN LOS ANGELES DEMOCRATS		C 0 0 7 5 3 9 3 9
Check if 24-hour report 48-hour report New repo	rt Amends repor	t filed on MTM / DTD / YTYTY
Full Name of Payee	☐ Memo I	tem Date of Public Distribution/Dissemination
NONE TO REPORT		Man , Logo , Lacadad
Mailing Address		Amount
City State	Zip Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	Maw / Dad / AaAaAaA
Name of Federal Candidate:	Support	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date	•	Disbursement For: Primary General
Per Election for Office Sought		Other (specify) ▶
Full Name of Payee	☐ Memo I	tem Date of Public Distribution/Dissemination
		المعممينيين المعمق السمسا
Mailing Address		Amount
	•	Amount
City State	Zip Code	
Purpose of Expenditure	· .	Date of Disbursement or Obligation
	Category/ Type	
Name of Federal Candidate:	Support	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date	~~~~~	Disbursement For: Primary General
Per Election for Office Sought		Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		<b>▶</b> 0
(a) SUBTOTAL of Unitemized Independent Expenditures		<b>0</b>
(a) TOTAL Independent Expenditures		<b>0</b>
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Date	м - м - / о - о - / ү - ү - ү - ү
Signature	. 23.0	hand had had

PAGE

OF1

## SCHEDULE F (FEC Form 3X)

# ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(То	be used only	by Poli	tical Com	mittees in the Gen	eral Election)	FOR LI	NE 25 OF FORM 3X
IAME OF COMMITTEE (In Full)							
PILIPINO AMERICAN LOS ANGI	ELES DEN	10CRA	<b>ATS</b>	•			
las your committee been designated to ma oordinated expenditures by a political party YES X NO		Full Na	me of Sub	ordinate Committee		····	
YES, name the designating committee:		Mailing	Address				
		City			1.5	State (	ZIP Code
		<u> </u>				l	
Full Name (Last, First, Middle Initial) of	Each Payee			☐ Memo Item	Purpose of E	xpenditure	Category/
Mailing Address					Date		Туре
City	State		Zip Code		Mam /	۱ رونده	~ <del>~</del> ~ <del>~</del> ~ ~
Name of Federal Candidate Supported	Office Sough	— —	louse	State:	Amount		
			Senate Presidential	District:		• •	
Aggregate General Election Expenditure for this Candidate ▶	V V V				<b> </b>	? <del>}</del>	(2)
Full Name (Last, First, Middle Initial) of	Each Payee			☐ Memo Item	Purpose of E	xpenditure	
Mailing Address							Category/ Type
City	State		Zip Code	<del></del>	Date	<b>D * D</b> /	~~~~~
Name of Federal Candidate Supported	Office Sough		louse	State:	Amount		
		-	Senate Presidential	District:	<b></b>	<del>~ ~ ~</del>	• • • • •
Aggregate General Election Expenditure for this Candidate ▶					<u> </u>	(7) <u></u> -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Full Name (Last, First, Middle Initial) of	Each Payee			☐ Memo Item	Purpose of E.	xpenditure	Category/
Mailing Address					Date		Туре
City .	State		Zip Code		Date /	D & D /	<b>*****</b>
Name of Federal Candidate Supported	Office Sough		louse	State:	Amount		
			Senate Presidential	District:		-	***************************************
Aggregate General Election Expenditure for this Candidate ▶	· · · · · · · · · · · · · · · · · · ·		<u> </u>			23-2	المحتسدة
SUBTOTAL of Expenditures This Page (op	tional)				0	() A A	
TOTAL This Period (last page this line nur	nber only)				0	· · · · · · · · · · · · · · · · · · ·	

PAGE 1

OF

### SCHEDULE H1 (FEC Form 3X)

### **METHOD OF ALLOCATION FOR:**

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full) PILIPINO AMERICAN LOS ANGELES DEMOCRATS							
USE ONLY ONE SECTION, A or B							
A. State and Local Party Committees							
Fixed Percentage (select one)							
Presidential-Only Election Year (28% Federal)							
Presidential and Senate Election Year (36% Federal)							
Senate-Only Election Year (21% Federal)							
X Non-Presidential and Non-Senate Election Year (15% Federal)							
B. Separate Segregated Funds and Nonconnected Committees  Indicate ratio below							
Federal%							
Nonfederal%							
This ratio applies to (check all that apply):							
Administrative Generic Voter Drive Public Communications Referencing Party Only							

# SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 1 OF 1

NAME OF COMMITTEE (In Full)

### PILIPINO AMERICAN LOS ANGELES DEMOCRATS

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only**: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

are allocated using a time/space method.		
ACTIVITY OR EVENT IDENTIFIER  NONE TO REPORT  ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:	FEDERAL %	NONFEDERAL %
New Revised Same as Previously Reported	·	
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	<b></b> %	%
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	·%	%
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	<b></b> %	%

# SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

			FOR LINE 188 OF FORM 3X
NAME OF COMMITTEE (In Full)			
PILIPINO AMERICAN LOS ANGELES	DEMOCRATS		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL A	MOUNT TRANSFERRED
NONE TO REPORT		TOTAL A	MOONT THANSFERRED
MONE TO KEI OKT	LWAWA \ LOZOZ \ LAZ		
	bearing bearing bear		
BREAKDOWN OF TRANSFER RECEIVED			
i) Total Administrative			
i) Total Administrative			
		P-0-0-0	
ii) Generic Voter Drive			
iii) Exempt Activities			
		Company Company (Company)	
iv) Direct Fundraising (List Activity or Event Ide	ntifier)		
			·
a)			
		<del></del>	
b)			•
5)			
c) Total Amount Transferred For Direct Fundra	sising		
v) Direct Candidate Support (List Activity or Ev	vent Identifier)		
Vy Direct Candidate Support (List Activity of L.)	en denuier,		
	And the same of the same of		
a)		لحيدين	
b)			
		المساكسين. مسيسيسيسيسي	
c) Total Amount Transferred For Direct Candi	tate Sunnort		
of total Attribute Transferred For Briefle Garden	ato oupport		
vi) Public Communications Referring Only to	Party (Made by PAC)		
TOTALS FO	OR BREAKDOWN OF TRANSF	ER RECEIVED	
		<del></del>	
TOTAL This Period (Administrative)		<u> </u>	i
TOTAL This Period (Generic Voter Drive)	i <u>.</u>		
TOTAL THIS FORMA (GOTIONO VOICE DITTO)			
		<del></del>	*
TOTAL This Period (Exempt Activities)			
· .		A-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4	~~~
TOTAL This Period (Direct Fundraising)			
			<del></del>
TOTAL This Period (Direct Candidate Support)			
The Time to the Common definition of the Company			
TOTAL This Period (Public Communications Referring	Only to Party)	<u>L</u>	
		-	
TOTAL This Period (Total Amount Transferred)			
·			

# SCHEDULE H4 (FEC Form 3X)

# DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE 1	OF 1	
FOR LINE	21a OF FORM :	3)

N/	AME OF COMMITTEE (In Full)			200470	
_	PILIPINO AMERICAN LO Full Name (Last, First, Middle Initial)	)S ANGE	LES DEM		Allocated Activity or Event:
A. NO	ONE TO REPORT			☐ Memo Item	
	Mailing Address				
					Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	<u> </u>			Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:			Category/ Type	Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
			<del>~~~~</del>		
_			<u> </u>		! Land on the second of the se
В.	Full Name (Last, First, Middle Initial)			☐ Memo Item	Allocated Activity or Event:  Administrative Fundraising Exempt
	Mailing Address				Administrative Fundraising Exempt  Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		•	Ţ ·	Allocated Activity or Event Year-To-Date
	Pulpose of Disbursament.				
	Activity or Event Identifier:		Category/		
			Type	Date	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
			0:-tt-0).	^^	
c.	Full Name (Last, First, Middle Initial)	•		☐ Memo Item	Allocated Activity or Event:
	Mailing Address	<u> </u>		Administrative Fundraising Exempt  Voter Drive Direct Candidate Support	
	City	State	Zip Code		Public Comm (ref to party only) by PAC
		Щ		·	Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				
	Activity or Event Identifier:			لحسسا	
				Category/ Type	Date Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
			<del>- S</del>	<del>* * * * * *</del>	
		حصا		<u></u>	
SI	JBTOTAL of Allocated Federal and NonFederal		•		
	FEDERAL SHARE	† <del>~~~</del>	NONFEDERAL	SHARE	= TOTAL AMOUNT
<b>-</b>	OTAL This Pariod (last page for each line and )	(Fodoral aba	: 10 (1/0)(1) ==	NonFoderal shi	21(2)(ii)
10	OTAL This Period (last page for each line only): FEDERAL SHARE	reuerai snar	e to 21(a)(i) and NONFEDERAL		TOTAL AMOUNT
-					
			<u> </u>		

# SCHEDULE H5 (FEC Form 3X)

### TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

To be used by State, District and Local Party Committees Only)	PAGE 1 OF 1 FOR LINE 18b OF FORM 3X
NAME OF COMMITTEE (In Full)	
PILIPINO AMERICAN LOS ANGELES DEMOCRATS	
NAME OF ACCOUNT  DATE OF RECEIPT  MANUAL TO DEPORT	TOTAL AMOUNT TRANSFERRED
NONE TO REPORT	
BREAKDOWN OF THIS TRANSFER  VOTER REGIST	PATION
i) Voter Registration	TO THE STATE OF TH
Total Amount Transferred for Voter Registration	
ii) Voter ID	VOTER ID
Total Amount Transferred for Voter ID	
iii) GOTV	GOTV
Total Amount Transferred for GOTV	
beatest.	GENERIC CAMPAIGN ACTIVITY
iv) Generic Campaign Activity	
Total Amount Transferred for Generic Campaign Activity	
NAME OF ACCOUNT DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
MANY / LOAD / LAAAAAAAA	TO THE AMERICAN THE PARTY OF TH
BREAKDOWN OF THIS TRANSFER	
i) Voter Registration VOTER REGIST	RATION
Total Amount Transferred for Voter Registration	
	VOTER ID
ii) Voter ID  Total Amount Transferred for Voter ID	
	GOTV
iii) GOTV	GOTV
Total Amount Transferred for GOTV	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
iv) Generic Campaign Activity	GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
<u> </u>	
TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (	Last Page Only)
TOTAL This Period (Voter Registration)	
TOTAL This Period (Voter ID)	
TOTAL This Period (GOTV)	(1) - 5 - 6 (1) - 5 - 6 (1) - 5
TOTAL This Period (Generic Campaign Activity)	2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2
TOTAL This Period (Total Amount of Transfers Received)	

# SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE	OF.	ı	
FOR LINE	30a OF	FORM	зх

ME OF COMMITTEE (In Full)				
PILIPINO AMERICAN LOS	ANGELES I		<b>!</b>	
A. Full Name (Last, First, Middle Init			☐ Memo Item	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaig
Mailing Address	· · · · · · · · · · · · · · · · · · ·			Allocated Activity or Event Year-To-Date
City	State	Zip Code		
Purpose of Disbursement		···	Category/ Type	Date Date
FEDERAL SHARE	+	LEVIN	SHARE	= TOTAL AMOUNT
B. Full Name (Last, First, Middle Init	ial) / Full Organia	zation Name	☐ Memo Item	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaig
Mailing Address				Allocated Activity or Event Year-To-Date
City	State	Zip Code		
Purpose of Disbursement			Category/ Type	Date Date
FEDERAL SHARE	+	LEVIN	SHARE	= TOTAL AMOUNT
		<u> </u>	7	
C. Full Name (Last, First, Middle Ini	tial) / Full Organia	zation Name	☐ Memo Item	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaig
Mailing Address		<u> </u>		Allocated Activity or Event Year-To-Date
City	State	Zip Code		
Purpose of Disbursement	·		Category/ Type	Date Date
FEDERAL SHARE	+	LEVIN	SHARE	= TOTAL AMOUNT
	ـا لــــ		0-4-6-6	
UBTOTAL of Shared Federal and Lev	in Activity This P	•	55	
FEDERAL SHARE	∟ٍلـ	LEVIN	SHARE	= TOTAL AMOUNT
OTAL This Period (last page for each FEDERAL SHARE	line only)(Federa	l share to 30(a)(i)	and Levin share to	30(a)(ii))  TOTAL AMOUNT
T EDENAL STIANE		LEVIN	SHARE	TOTAL ABBOUT
OTAL This Period for the Levin Share			(1)	

# SCHEDULE L (FEC Form 3X)

**AGGREGATION PAGE: LEVIN FUNDS** 

• • • • • • • • • • • • • • • • • • • •	E OF COMMITTEE (IN FUII) PILIPINO AMERICAN LOS	ANGELES DEMOCRATS	
NAM	E OF ACCOUNT		
	NONE TO REPORT		
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS		
	(a) Itemized	····	<u> </u>
	(Use Schedule L-A)		5110 <u></u>
	(b) Unitemized		
	(2)		
	(c) Total		
	<b>、</b> ,	Carra Tammilann 18 m 18 mach ann 12 m 18 m	<u> ( من ما کا کامی کا میں میں میں کی کی کی کہ کی کہ کی کا کی کی کا کی کی کا کی کی</u> ایک کی ک
2.	OTHER RECEIPTS		
		The common of th	Charlette (1995 - 1995) - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1 
3.	TOTAL RECEIPTS		
	(Add Lines 1c and 2)	Collaboration Collins Collins (Commission Collins)	
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
	(a) Voter Registration		
	(b) Voter ID		i Here the section of the contract of the contract of the section of the contract of the section of the section of
	(c) GOTV	Landy on a grand second	
			<u> </u>
	(d) Generic Campaign	····	
	(a) Tatal		
	(e) Total		<u> </u>
<b>5</b> .	OTHER DISBURSEMENTS		
•	Officer biodonia management		
<b>6</b> .	TOTAL DISBURSEMENTS	و من المسلم	
	(Add Lines 4e and 5)	<u> </u>	
_			Manager of the control of the Contro
7:	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	······································	
	(Mr. Goldini, B., and Galli, and G. Gallian, y. 121)		(
8.	RECEIPTS		
	(from Line 3)		[[]]
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9.	SUBTOTAL(Add Lines 7 and 8)		
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10.	DISBURSEMENTS		2-2-2-2-2-3-2-3-2-2-2-2-2-2-2-2-2-2-2-2
	(From Line 6)	· · · · · · · · · · · · · · · · · · ·	
44	ENDING CASH ON HAND		
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)		استمست بمستميدون منتمسوبم سنوريم بينمايا

## SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

PAGE 1 OF 1 Use separate schedule(s) for each category of the

- 1	EMIZED RECEIFIS OF LEVIN FUNDS			gation Page	(check only one) 1a 2
An or	ry information copied from such Reports and Statements may for commercial purposes, other than using the name and a	ay not t address	of any p	or used by any perso political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) PILIPINO AMERICAN LOS ANGELES DEMOCR	RATS			
L	Full Name of Individual (Last, First, Middle Initial) or Full C		tion Nar	ne  Memo Item	Date of Receipt
A. No	ONE TO REPORT Mailing Address			•	W.W.W. \ D.Z.D. \ A.Z.A.Z.A.A.A.
		Amount of Each Receipt this Period			
	City	State		Zip Code	
	Name of Employer (for Individual)	ı	. •		Aggregate Year-to-Date
	Occupation (for Individual)		•		
В.	Full Name of Individual (Last, First, Middle Initial) or Full C	Organiza	tion Nan	ne	Date of Receipt
	Mailing Address		•	-	Amount of Each Proceed this Paried
	City	State		Zip Code	Amount of Each Receipt this Period
	Name of Employer (for Individual)	•			Aggregate Year-to-Date
	Occupation (for Individual)				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name					Date of Receipt
	Mailing Address	Amount of Each Page in this Page in			
	City	State		Zip Code	Amount of Each Receipt this Period
	Name of Employer (for Individual)	· .		1	Aggregate Year-to-Date
	Occupation (for Individual)				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Memo Item  D.					Date of Receipt
	Mailing Address				
	City	State	<del> ·</del> _	Zip Code	Amount of Each Receipt this Period
	Name of Employer (for Individual)			•	Aggregate Year-to-Date
-يجسم	Occupation (for Individual)				
s	UBTOTAL of Receipts This Page (optional)		·		
T	OTAL This Period (last page this line number only)				/ / / / / / / / / / / / / / / / / / /

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# SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER: LP	PAGE 1 OF 1
(check only one) 4a	

Aggregation Page OF LEVIN FUNDS 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) ILIPINO AMERICAN LOS ANGELES DEMOCRATS Full Name (Last, First, Middle Initial) / Full Organization Name ☐ Memo Item Date of Disbursement NONE TO REPORT Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Full Name (Last, First, Middle Initial) / Full Organization Name B. Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Full Name (Last, First, Middle Initial) / Full Organization Name ☐ Memo Item C. Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Full Name (Last, First, Middle Initial) / Full Organization Name D. Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Full Name (Last, First, Middle Initial) / Full Organization Name ☐ Memo Item E. Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement SUBTOTAL of Disbursements This Page (optional).....

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

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Federal Election Comn ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this filing	INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked $1/26/22$
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
N	ext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PREPARER (3/2015)	2/7/22 DATE PREPARED
(3/2015)	