

# 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**  
**Fairshake**

ADDRESS (number and street) **2740 SW Martin Downs Blvd**  
**#51**  
 Check if different than previously reported. (ACC) **Palm City** **FL** **34990**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** **C00835959** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  Feb 20 (M2)  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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period   /   /  **2024** through   /   /  **2024**

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

Signature of Treasurer **Philipczyk, Brandon, , ,** Date   /   /  **2024**

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

SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Fairshake

Report Covering the Period: From: 01 / 01 / 2024 To: 01 / 31 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		66813859.26
(b) Cash on Hand at Beginning of Reporting Period.....	66813859.26	
(c) Total Receipts (from Line 19) .....	6280635.46	6280635.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	73094494.72	73094494.72
7. Total Disbursements (from Line 31).....	226259.14	226259.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	72868235.58	72868235.58
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Fairshake**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6250000.00	6250000.00
(ii) Unitemized .....	260.00	260.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6250260.00	6250260.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6250260.00	6250260.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	30375.46	30375.46
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)).....▶	6280635.46	6280635.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6280635.46	6280635.46

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	226259.14	226259.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	226259.14	226259.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	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	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
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)) ..	226259.14	226259.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	226259.14	226259.14

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6250260.00	6250260.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6250260.00	6250260.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	226259.14	226259.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	30375.46	30375.46
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	195883.68	195883.68

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 OF 14
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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)  
**Fairshake**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Blockchain Capital, LLC**

Mailing Address 440 Pacific Ave

City San Francisco	State CA	Zip Code 94133-4639
-----------------------	-------------	------------------------

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 ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2024

**Transaction ID : C17C75142F194DBB9314**

Amount of Each Receipt this Period  
100000.00

Memo Item

See Attribution Below

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

Mailing Address 440 Pacific Ave

City San Francisco	State CA	Zip Code 94133-4639
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Blockchain Capital, LLC	Occupation (for Individual) Partner
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2024

**Transaction ID : 844F0977BB9BB1E6EC7**

Amount of Each Receipt this Period  
50000.00

Memo Item

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

Mailing Address 440 Pacific Ave

City San Francisco	State CA	Zip Code 94133-4639
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Blockchain Capital, LLC	Occupation (for Individual) Partner
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2024

**Transaction ID : 02B791C071C2239AF62**

Amount of Each Receipt this Period  
50000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100000.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Fairshake**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Electric Capital Partners**

Mailing Address 536 Bryant St

City Palo Alto	State CA	Zip Code 94301-1703
-------------------	-------------	------------------------

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 ▼  
500000.00

Date of Receipt  

MM	DD	YYYY
01	26	2024

**Transaction ID : 7407D186748C47F5AE05**

Amount of Each Receipt this Period  
500000.00

Memo Item

See Attribution Below

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

Mailing Address 536 Bryant St

City Palo Alto	State CA	Zip Code 94301-1703
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Electric Capital Partners	Occupation (for Individual) Partner
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

MM	DD	YYYY
01	26	2024

**Transaction ID : BB985A9DB3E3441AA85**

Amount of Each Receipt this Period  
250000.00

Memo Item

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

Mailing Address 536 Bryant St

City Palo Alto	State CA	Zip Code 94301-1703
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Electric Capital Partners	Occupation (for Individual) Partner
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

MM	DD	YYYY
01	26	2024

**Transaction ID : 80D2AE140DDE2584328**

Amount of Each Receipt this Period  
250000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Fairshake**

**A. Payward, Inc.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 237 Kearny St  
 City San Francisco State CA Zip Code 94108-4502  
 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 ▼ 750000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 12 / 2024  
**Transaction ID : 3E0BAC612CAE4004B52D**  
 Amount of Each Receipt this Period  
 750000.00  
 Memo Item

**B. Winklevoss, Cameron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 W 24th St  
 City New York State NY Zip Code 10010-3207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Winklevoss Capital Management Founder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2450000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2024  
**Transaction ID : F69533AC20F44CB19E1B**  
 Amount of Each Receipt this Period  
 2450000.00  
 Memo Item

**C. Winklevoss, Tyler, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 W 24th St  
 City New York State NY Zip Code 10010-3207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Winklevoss Capital Management Founder  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2450000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2024  
**Transaction ID : 22922ADFE9F3454DB7D1**  
 Amount of Each Receipt this Period  
 2450000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5650000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6250000.00



# 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 14  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Fairshake**

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

**A. Targeted Platform Media**

Mailing Address PO Box 237

City Crownsville	State MD	Zip Code 21032
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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 ▼  
30375.46

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 10 / 2024

**Transaction ID : F12250A1E891BBF502E**

Amount of Each Receipt this Period  
 30375.46

Memo Item  
 Partial Refund of Media Buys

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  
 M M / D D / Y Y Y Y

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  
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30375.46
<b>TOTAL</b> This Period (last page this line number only).....▶	30375.46

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Fairshake

Full Name (Last, First, Middle Initial)

### A. AdImpact

Mailing Address 1427 Leslie Ave

City  
Alexandria

State  
VA

Zip Code  
22301

Purpose of Disbursement

Data Analysis

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
0	1		2	6		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : VDFB3E22A1

Amount of Each Disbursement this Period

[Redacted] 15714.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. AdImpact

Mailing Address 1427 Leslie Ave

City  
Alexandria

State  
VA

Zip Code  
22301

Purpose of Disbursement

Data Analysis

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
0	1		3	0		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : V28A7CD07B

Amount of Each Disbursement this Period

[Redacted] 7857.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Amalgamated Bank

Mailing Address 1825 K Street, NW

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement

Bank Fees

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
0	1		2	6		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : 520E2F473F

Amount of Each Disbursement this Period

[Redacted] 352.75

Memo Item

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

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

[Redacted] 23923.75

[Redacted]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form with checkboxes for line numbers 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. 21b is checked.

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NAME OF COMMITTEE (In Full)
Fairshake

Form A: BV Strategies. Includes fields for Full Name, Mailing Address (28 Baraud Road South), City (Scarsdale), State (NY), Zip Code (10583), Purpose of Disbursement (Media Relations Consulting), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/26/2024), FEC Identification Number (C), Transaction ID (V069608319F), Amount of Each Disbursement (2500.00), and Memo Item checkbox.

Form B: Covington & Burling LLP. Includes fields for Full Name, Mailing Address (850 10th St NW), City (Washington), State (DC), Zip Code (20001), Purpose of Disbursement (Legal Fees), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/09/2024), FEC Identification Number (C), Transaction ID (V0AC0A0811!), Amount of Each Disbursement (11932.50), and Memo Item checkbox.

Form C: Critical Mention. Includes fields for Full Name, Mailing Address (19 West 44th St Suite 300), City (New York), State (NY), Zip Code (10036), Purpose of Disbursement (Software), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/04/2024), FEC Identification Number (C), Transaction ID (V570B52765), Amount of Each Disbursement (666.67), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 15099.17
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)

Fairshake

Full Name (Last, First, Middle Initial)

### A. Dockside Strategies

Mailing Address 8 The Green  
Ste 14712

City  
Dover

State  
DE

Zip Code  
19901

Purpose of Disbursement  
Strategic and Administrative Consulting

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		05		2024

FEC Identification Number

C
---

Transaction ID : VB890EC036!

Amount of Each Disbursement this Period

25000.00
----------

Memo Item

Full Name (Last, First, Middle Initial)

### B. Guidant Polling and Strategy

Mailing Address PO Box 1505

City  
Boise

State  
ID

Zip Code  
83701

Purpose of Disbursement  
Polling

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		12		2024

FEC Identification Number

C
---

Transaction ID : V736224D4A7

Amount of Each Disbursement this Period

27500.00
----------

Memo Item

Full Name (Last, First, Middle Initial)

### C. Impact Research

Mailing Address 260 Commerce Street  
Fourth Floor

City  
Montgomery

State  
AL

Zip Code  
36104

Purpose of Disbursement  
Polling

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		26		2024

FEC Identification Number

C
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Transaction ID : V9AB78DC0!

Amount of Each Disbursement this Period

30500.00
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Memo Item

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

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

83000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**Fairshake**

Full Name (Last, First, Middle Initial) <b>A. Main Street Media Group</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2024
Mailing Address PO Box 25093		FEC Identification Number C [REDACTED] <b>Transaction ID : VDFF59404F</b>
City Alexandria	State VA	Zip Code 22313
Purpose of Disbursement Retainer		001 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Moore Information Group</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2024
Mailing Address 350 Ryman Street Suite 300		FEC Identification Number C [REDACTED] <b>Transaction ID : VE6C1CAA35</b>
City Missoula	State MT	Zip Code 59802
Purpose of Disbursement Polling		001 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 71400.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Narrator</b>		Date of Disbursement MM / DD / YYYY 01 / 26 / 2024
Mailing Address 41 Horseshoe Lane		FEC Identification Number C [REDACTED] <b>Transaction ID : V1EC3DDC4</b>
City Lemont	State IL	Zip Code 60439
Purpose of Disbursement Strategy Consulting		001 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	78900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Fairshake**

**A. Reger Research**

Full Name (Last, First, Middle Initial)

Mailing Address 30 Sussex Drive

City Lewes State DE Zip Code 19958

Purpose of Disbursement Research

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 22 / 2024

FEC Identification Number: C

Transaction ID : VB387E4B4C

Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. UPS Store**

Full Name (Last, First, Middle Initial)

Mailing Address 2740 Martin Downs Blvd

City Palm City State FL Zip Code 34990

Purpose of Disbursement Mailbox Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 08 / 2024

FEC Identification Number: C

Transaction ID : VA2409A70D

Amount of Each Disbursement this Period: 307.79

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	25307.79
<b>TOTAL</b> This Period (last page this line number only).....▶	226230.71