

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 DMFI PAC

ADDRESS (number and street) P.O. Box 3617 Washington DC 20027 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 3. IS THIS REPORT NEW OR AMENDED C C00710848 X (N) (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special Election on: 03/05/2024 in the State of CA

5. Covering Period 01/25/2024 through 02/14/2024

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 Petterson, Jay, , ,

Signature of Treasurer Petterson, Jay, , , Date 02/22/2024

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

DMFI PAC

Report Covering the Period: From: 01 / 25 / 2024 To: 02 / 14 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		1690735.55
(b) Cash on Hand at Beginning of Reporting Period.....	1671310.19	
(c) Total Receipts (from Line 19)	1430892.35	1538517.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3102202.54	3229253.10
7. Total Disbursements (from Line 31).....	181665.49	308716.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2920537.05	2920537.05
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9840.00	

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

DMFI PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 25 / 2024 To: M M / D D / Y Y Y Y 02 / 14 / 2024

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).....	17600.00	28900.00
(ii) Unitemized	1215.00	2540.20
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	18815.00	31440.20
(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)	18815.00	31440.20
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1412077.35	1507077.35
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)).....▶	1430892.35	1538517.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1430892.35	1538517.55

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	423.74	16482.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	423.74	16482.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditures (use Schedule E)	149395.00	169671.00
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).....	31846.75	117563.03
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)) ..	181665.49	308716.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	181665.49	308716.05

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)	18815.00	31440.20
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18815.00	31440.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	423.74	16482.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	423.74	16482.02

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
DMFI PAC

A. Forsythe, Duncan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3031 Hollycrest Ave
 City Thousand Oaks State CA Zip Code 91362-4990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Teledyne Technologies Occupation (for Individual) Accountant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 08 / 2024**
Transaction ID : 5492913
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35815.00

Date of Receipt **02 / 11 / 2024**
Transaction ID : 5492913E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Irom, Dan, Jacob, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 W 7Th St
 City New York State NY Zip Code 10011-6608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Darsana Capital Partners LP Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 02 / 2024**
Transaction ID : 5488495
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5250.00
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: (check only one)	PAGE 7 OF 26
<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)
DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Levi, Marilyn, , ,			Date of Receipt MM / DD / YYYY 01 / 29 / 2024
Mailing Address 1077 30Th St NW Unit 206			Transaction ID : 5490344
City Washington	State DC	Zip Code 20007-3848	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) US Department Of Health And Human Serv		Occupation (for Individual) Physician	* Earmarked Contribution: See Below
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ACTBLUE			Date of Receipt MM / DD / YYYY 01 / 31 / 2024
Mailing Address PO Box 441146			Transaction ID : 5490344E
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C C00401224			<input checked="" type="checkbox"/> Memo Item
Name of Employer (for Individual) US Department Of Health And Human Serv		Occupation (for Individual) Conduit total listed in Agg. field	Note: Above Contribution earmarked through this organization.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 35815.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lewis, Ann, , ,			Date of Receipt MM / DD / YYYY 02 / 04 / 2024
Mailing Address 4550 N Park Ave			Transaction ID : 5490350
City Chevy Chase	State MD	Zip Code 20815-7232	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	* Earmarked Contribution: See Below
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
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 8 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DMFI PAC

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

A. ACTBLUE

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 35815.00

Date of Receipt **MM / DD / YYYY**
02 / 04 / 2024

Transaction ID : 5490350E

Amount of Each Receipt this Period 5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

B. Prosor, Lior, , ,

Mailing Address 15 W 26Th St FI 9

City New York State NY Zip Code 10010-1026

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

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

Hanaco Ventures

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **MM / DD / YYYY**
01 / 29 / 2024

Transaction ID : 5491378

Amount of Each Receipt this Period 5000.00

Memo Item

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

C. Rosenzweig, Michael, , ,

Mailing Address 230 Northland Ridge Trl

City Atlanta State GA Zip Code 30342-2468

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

Name of Employer (for Individual) Occupation (for Individual) Not Employed

Not Employed

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **MM / DD / YYYY**
02 / 06 / 2024

Transaction ID : 5492911

Amount of Each Receipt this Period 1000.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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: (check only one)	PAGE 9 OF 26
	<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)
DMFI PAC

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35815.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 11 / 2024

Transaction ID : 5492911E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Schneider, Bruce, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 Elmridge Dr

City Scarsdale	State NY	Zip Code 10583-6627
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Stroock & Stroock & Lavan LLP Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2024

Transaction ID : 5490343

Amount of Each Receipt this Period
600.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
35815.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2024

Transaction ID : 5490343E

Amount of Each Receipt this Period
600.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 10 OF 26
(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	

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NAME OF COMMITTEE (In Full)
DMFI PAC

A. Schneider, Bruce, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Elmridge Dr
 City Scarsdale State NY Zip Code 10583-6627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stroock & Stroock & Lavan LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 02 / 08 / 2024
Transaction ID : 5492912
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35815.00

Date of Receipt 02 / 11 / 2024
Transaction ID : 5492912E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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).....	250.00
TOTAL This Period (last page this line number only).....	17600.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Energized For Change PAC		Date of Receipt MM / DD / YYYY 02 / 09 / 2024 Transaction ID : 5491380
Mailing Address PO Box 523082		Amount of Each Receipt this Period 110000.00
City Springfield	State VA	Zip Code 22152-5082
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 110000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Irom, Dan, Jacob, ,		Date of Receipt MM / DD / YYYY 02 / 02 / 2024 Transaction ID : 5488494
Mailing Address 40 W 7Th St		Amount of Each Receipt this Period 20000.00
City New York	State NY	Zip Code 10011-6608
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Darsana Capital Partners LP	Occupation (for Individual) Partner	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mindich, Eric, , ,		Date of Receipt MM / DD / YYYY 02 / 05 / 2024 Transaction ID : 5488496
Mailing Address PO Box 907		Amount of Each Receipt this Period 250000.00
City New York	State NY	Zip Code 10150-0907
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Investor	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250000.00	

SUBTOTAL of Receipts This Page (optional).....▶	380000.00
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: (check only one)	PAGE 12 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DMFI PAC

A. Pergament, Bruce, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Old Wagon Ln
 City Old Westbury State NY Zip Code 11568-1045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pergament Realty Management LLC Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 29 / 2024
Transaction ID : 5490356
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below Non-Contribution Account

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35815.00

Date of Receipt 01 / 31 / 2024
Transaction ID : 5490356E
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Prosor, Lior, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 W 26Th St Fl 9
 City New York State NY Zip Code 10010-1026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hanaco Ventures Occupation (for Individual) General Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 29 / 2024
Transaction ID : 5491379
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	10000.00
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: (check only one)	PAGE 13 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DMFI PAC

A. Rafalowicz, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Fenimore Rd
 City New Rochelle State NY Zip Code 10804-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 10000.00

Date of Receipt **02 / 05 / 2024**
Transaction ID : 5492920
 Amount of Each Receipt this Period 10000.00
 Memo Item
 * Earmarked Contribution: See Below Non-Contribution Account

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 35815.00

Date of Receipt **02 / 11 / 2024**
Transaction ID : 5492920E
 Amount of Each Receipt this Period 10000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Rosenstein, Lizanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 237168
 City New York State NY Zip Code 10023-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Private Investor
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 10000.00

Date of Receipt **02 / 06 / 2024**
Transaction ID : 5492921
 Amount of Each Receipt this Period 10000.00
 Memo Item
 * Earmarked Contribution: See Below Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... **20000.00**
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: (check only one)	PAGE 14 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
DMFI PAC

A. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35815.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2024

Transaction ID : 5492921E

Amount of Each Receipt this Period
10000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Simon, Deborah, , ,

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

Mailing Address 950 Laurelwood

City Carmel	State IN	Zip Code 46032-8738
----------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Philanthropist
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2024

Transaction ID : 5491381

Amount of Each Receipt this Period
1000000.00

Memo Item

Non-Contribution Account

C. Tessler, Lenard, , ,

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

Mailing Address 6 Baiting Hollow Rd

City East Hampton	State NY	Zip Code 11937-8405
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2024

Transaction ID : 5490357

Amount of Each Receipt this Period
2000.00

Memo Item

* Earmarked Contribution: See Below Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	1002000.00
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: (check only one)	PAGE 15 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
DMFI PAC

A. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 35815.00

Date of Receipt 01 / 31 / 2024
Transaction ID : 5490357E

Amount of Each Receipt this Period 2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B.

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

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

C.

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

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)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶ 1412000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
DMFI PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 01 / 28 / 2024	
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] Transaction ID : 500655747	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 9.88
Purpose of Disbursement Credit Card Fees		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 01 / 31 / 2024	
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] Transaction ID : 500655748	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 54.72
Purpose of Disbursement Credit Card Fees		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 04 / 2024	
Mailing Address PO Box 441146		FEC Identification Number C [REDACTED] Transaction ID : 500655750	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 204.23
Purpose of Disbursement Credit Card Fees		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	268.83
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

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)
DMFI PAC

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 11 / 2024

FEC Identification Number: C

Transaction ID : 500655749

Amount of Each Disbursement this Period: 79.41

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 79.41

TOTAL This Period (last page this line number only)..... ▶ 348.24

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)

Grid for line numbers 21b-30b with checkboxes, where 29 is checked.

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)
DMFI PAC

Form A: ActBlue Technical Services. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Credit Card Fees), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/31/2024), FEC Identification Number, Transaction ID (500655751), and Amount of Each Disbursement (276.50).

Form B: ActBlue Technical Services. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Credit Card Fees), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/11/2024), FEC Identification Number, Transaction ID (500655752), and Amount of Each Disbursement (790.00).

Form C: Beth A. Dindas Consulting, LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Fundraising Consulting), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/30/2024), FEC Identification Number, Transaction ID (500655755), and Amount of Each Disbursement (5000.00).

SUBTOTAL of Disbursements This Page (optional) 6066.50
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 Page

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
DMFI PAC

A. JL Research

Full Name (Last, First, Middle Initial)

Mailing Address 312 11Th Ave
Apt 7D

City New York State NY Zip Code 10001-1229

Purpose of Disbursement Research

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 07 / 2024

FEC Identification Number: C

Transaction ID : 500655756

Amount of Each Disbursement this Period: 3000.00

Memo Item Non-Contribution Account

B. The Mellman Group

Full Name (Last, First, Middle Initial)

Mailing Address 1023 31St St NW
FI 5

City Washington State DC Zip Code 20007-4458

Purpose of Disbursement Research

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 26 / 2024

FEC Identification Number: C

Transaction ID : 500655759

Amount of Each Disbursement this Period: 22650.00

Memo Item Non-Contribution Account

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 Non-Contribution Account

SUBTOTAL of Disbursements This Page (optional)..... ▶ 25650.00

TOTAL This Period (last page this line number only)..... ▶ 31716.50

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DMFI PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jewish Voice			Nature of Debt (Purpose): Print Advertising; Originally reported estimated cost of \$14,000 on 1/19/24 48-Hour Report
Mailing Address 641 Lexington Ave			
City New York	State NY	Zip Code 10022-4503	

Outstanding Balance Beginning This Period 12000.00	Transaction ID : 1250013278	
Amount Incurred This Period 0.00	Payment This Period 12000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tribe Media Corp			Nature of Debt (Purpose): Print Advertising
Mailing Address 1880 CENTRAL Park E Ste 200			
City Los Angeles	State CA	Zip Code 90067	

Outstanding Balance Beginning This Period 0.00	Transaction ID : 1250013380	
Amount Incurred This Period 9840.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9840.00

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	9840.00
2) TOTALS This Period (last page this line number only)..... ▶	9840.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	9840.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

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

Full Name of Payee Jewish Herald-Voice
Non-Contribution Account
Mailing Address PO Box 153
City Houston State TX Zip Code 77001-0153
Purpose of Expenditure Print Advertising
Name of Federal Candidate: FLETCHER, ELIZABETH, , ,
Calendar Year-To-Date Per Election for Office Sought 7475.00
Disbursement For: Primary

Full Name of Payee Jewish Herald-Voice
Non-Contribution Account
Mailing Address PO Box 153
City Houston State TX Zip Code 77001-0153
Purpose of Expenditure Print Advertising
Name of Federal Candidate: AGWAN, PERVEZ, S, ,
Calendar Year-To-Date Per Election for Office Sought 7475.00
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 7475.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Petterson, Jay, , ,
Signature

Date 02 / 22 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

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

Full Name of Payee Jewish Voice
Mailing Address 641 Lexington Ave
City New York State NY Zip Code 10022-4503
Purpose of Expenditure Print Advertising: Originally reported estimated cost of \$14,000 on 1/19/24 48-Hour Report
Name of Federal Candidate: SUOZZI, THOMAS, , ,
Calendar Year-To-Date Per Election for Office Sought 35276.00
Date of Public Distribution/Dissemination 01/19/2024
Amount 12000.00
Transaction ID : 500655743
Date of Disbursement or Obligation 02/01/2024
Office Sought: House District: 03 State: NY

Full Name of Payee Long Island Jewish World
Mailing Address PO Box 220297
City Great Neck State NY Zip Code 11022-0297
Purpose of Expenditure Digital Advertising
Name of Federal Candidate: SUOZZI, THOMAS, , ,
Calendar Year-To-Date Per Election for Office Sought 35276.00
Date of Public Distribution/Dissemination 02/09/2024
Amount 3000.00
Transaction ID : 500655551
Date of Disbursement or Obligation 02/13/2024
Office Sought: House District: 03 State: NY

(a) SUBTOTAL of Itemized Independent Expenditures 15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Petterson, Jay, , ,
Signature

Date 02/22/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

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

Full Name of Payee San Diego Jewish Journal
Mailing Address 7742 Herschel Ave Ste H
City La Jolla State CA Zip Code 92037-4444
Purpose of Expenditure Pre-Payment of Print Advertising
Category/Type
Date of Public Distribution/Dissemination
Amount 1200.00
Transaction ID : 500655757
Date of Disbursement or Obligation 02 / 05 / 2024

Name of Federal Candidate: SCHIFF, ADAM, , ,
Support Oppose
Office Sought: House Senate State: CA
Disbursement For: Primary General 2024 Other (specify) Special Primary

Full Name of Payee San Diego Jewish Journal
Mailing Address 7742 Herschel Ave Ste H
City La Jolla State CA Zip Code 92037-4444
Purpose of Expenditure Pre-Payment of Print Advertising
Category/Type
Date of Public Distribution/Dissemination
Amount 490.00
Transaction ID : 500656498
Date of Disbursement or Obligation 02 / 13 / 2024

Name of Federal Candidate: SCHIFF, ADAM, , ,
Support Oppose
Office Sought: House Senate State: CA
Disbursement For: Primary General 2024 Other (specify) Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures 1690.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Petterson, Jay, , ,
Signature

Date 02 / 22 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

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

Full Name of Payee San Diego Jewish World
Mailing Address 8260 Cafanzara Ct
City San Diego State CA Zip Code 92119-1103
Purpose of Expenditure Print Advertising
Name of Federal Candidate: SCHIFF, ADAM, , ,
Calendar Year-To-Date Per Election for Office Sought 11760.00
Date of Public Distribution/Dissemination 02/07/2024
Amount 230.00
Transaction ID : 500655758
Date of Disbursement or Obligation 02/06/2024
Office Sought: Senate State: CA

Full Name of Payee Tribe Media Corp
Mailing Address 1880 CENTRAL Park E Ste 200
City Los Angeles State CA Zip Code 90067
Purpose of Expenditure Print Advertising
Name of Federal Candidate: SCHIFF, ADAM, , ,
Calendar Year-To-Date Per Election for Office Sought 11760.00
Date of Public Distribution/Dissemination 02/09/2024
Amount 9840.00
Transaction ID : 500656497
Date of Disbursement or Obligation
Office Sought: Senate State: CA

(a) SUBTOTAL of Itemized Independent Expenditures 230.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Petterson, Jay, , ,
Signature

Date 02/22/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

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

Full Name of Payee: Trilogy Interactive LLC
Mailing Address: PO Box 4177
City: Mountain View, State: CA, Zip Code: 94040-0177
Purpose of Expenditure: Digital Advertising
Name of Federal Candidate: MIN, DAVE, . . .
Amount: 73333.34
Transaction ID: 50065537
Date of Disbursement or Obligation: 02/08/2024

Full Name of Payee: Trilogy Interactive LLC
Mailing Address: PO Box 4177
City: Mountain View, State: CA, Zip Code: 94040-0177
Purpose of Expenditure: Digital Advertising
Name of Federal Candidate: WEISS, JOANNA, . . .
Amount: 36666.66
Transaction ID: 50065538
Date of Disbursement or Obligation: 02/08/2024

(a) SUBTOTAL of Itemized Independent Expenditures 110000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Petterson, Jay, . . .
Signature

Date 02/22/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DMFI PAC
FEC IDENTIFICATION NUMBER C C00710848

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

Full Name of Payee: Trilogy Interactive LLC
Mailing Address: PO Box 4177
City: Mountain View, State: CA, Zip Code: 94040-0177
Purpose of Expenditure: Digital Advertising Production
Name of Federal Candidate: MIN, DAVE, . . .
Amount: 10000.00
Transaction ID: 50065539
Date of Disbursement or Obligation: 02/08/2024

Full Name of Payee: Trilogy Interactive LLC
Mailing Address: PO Box 4177
City: Mountain View, State: CA, Zip Code: 94040-0177
Purpose of Expenditure: Digital Advertising Production
Name of Federal Candidate: WEISS, JOANNA, . . .
Amount: 5000.00
Transaction ID: 50065540
Date of Disbursement or Obligation: 02/08/2024

(a) SUBTOTAL of Itemized Independent Expenditures 15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 149395.00

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

Petterson, Jay, . . .
Signature

Date 02/22/2024