

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
Madison Project, Inc.

ADDRESS (number and street) PO Box 1017
Check if different than previously reported. (ACC) Merrifield VA 22116

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00298000 3. IS THIS REPORT NEW OR AMENDED (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

5. Covering Period 05 / 01 / 2022 through 05 / 31 / 2022

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

Type or Print Name of Treasurer

Signature of Treasurer Amorin, Kelly, , , [Electronically Filed] Date 06 / 20 / 2022

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

Madison Project, Inc.

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="277433.81"/>	<input type="text" value="277433.81"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="157220.81"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="128963.21"/>	<input type="text" value="580345.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="286184.02"/>	<input type="text" value="857778.81"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="92218.68"/>	<input type="text" value="663813.47"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="193965.34"/>	<input type="text" value="193965.34"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Madison Project, Inc.

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).....	48883.00	152462.00
(ii) Unitemized	80080.21	427883.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	128963.21	580345.00
(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)	128963.21	580345.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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)).....▶	128963.21	580345.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	128963.21	580345.00

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	92218.68	631313.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	92218.68	631313.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	32500.00
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)) ..	92218.68	663813.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	92218.68	663813.47

DETAILED SUMMARY PAGE
of Disbursements

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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)	128963.21	580345.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	128963.21	580345.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	92218.68	631313.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	92218.68	631313.47

**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 54
	<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)
Madison Project, Inc.

A. ARBELO, JOSE, A, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 ROWSLEY ST APT 2
 City BRIDGEPORT State CT Zip Code 06605-3094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320696
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. ASENSIO, DENNIS, S, DR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6356 HASTINGS LN
 City LISLE State IL Zip Code 60532-3219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320651
 Amount of Each Receipt this Period 225.00
 Memo Item
 CONTRIBUTION

C. ASTER, BARBARA, L, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 VALLEY DR
 City BELVIDERE State NJ Zip Code 07823-3163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321103
 Amount of Each Receipt this Period 175.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
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 7 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. BAKER, WILLIAM, G, MAJ, USA RET

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

Mailing Address 6311 W SHANNON ST

City CHANDLER	State AZ	Zip Code 85226-5885
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) WILLIAM G BAKER INF US ARMY	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.321479

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

B. BARNHART, NANCY, L, MRS,

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

Mailing Address 7370 WALSH RD

City MILLINGTON	State TN	Zip Code 38053-6020
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.319966

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

C. BECKMAN, ELIZABETH, P, MS,

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

Mailing Address 11202 SE 77TH PL

City NEWCASTLE	State WA	Zip Code 98056-1638
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) N/A	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.319604

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 54
	<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)
Madison Project, Inc.

A. BELER, SAMUEL, K, MR, TTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1672 FOOTHILL PARK CIR
 City LAFAYETTE State CA Zip Code 94549-2245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319797
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BELER, SAMUEL, K, MR, TTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1672 FOOTHILL PARK CIR
 City LAFAYETTE State CA Zip Code 94549-2245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319798
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. BIGELOW, WAYNE, B, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 SEDONA ST
 City ROCKLIN State CA Zip Code 95765-5423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319573
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
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 9 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. BIGELOW, WAYNE, B, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 SEDONA ST
 City ROCKLIN State CA Zip Code 95765-5423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319574
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. BISHOP, JACK, L, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 RIVERS DR
 City LAKE BLUFF State IL Zip Code 60044-1313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320873
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BLENIS, BONNIE, J, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 WILLOWBROOK RD
 City SURPRISE State NY Zip Code 12176-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 HOMEMAKER HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320063
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1225.00
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 10 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. BLOCK, GEORGE, P, MR, JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 331
 City EAST JORDAN State MI Zip Code 49727-0331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.321465
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. BLUE, PATRICIA, A, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 PEBBLE BEACH DR
 City BENTON State LA Zip Code 71006-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.319967
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BURNETT, BONNIE, A, MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 E FARNUM AVE
 City ROYAL OAK State MI Zip Code 48067-1913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.319694
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
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 11 OF 54
(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)
Madison Project, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CARPER, MARSHALL, J, DR, M.D.

Mailing Address **PO BOX 4626**

City CHARLESTON	State WV	Zip Code 25364-4626
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319547

Amount of Each Receipt this Period

200.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CEO, JOSEPH, S, MR,

Mailing Address **982 CELIA LN**

City LEXINGTON	State KY	Zip Code 40504-2255
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U RHODA ISLAND	Occupation (for Individual) RETIRED MUSIC TEACHER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320614

Amount of Each Receipt this Period

500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CHEELEY, CLAIRE, , MS,

Mailing Address **46-161 NAHIKU PL**

City KANEOHE	State HI	Zip Code 96744-3625
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319578

Amount of Each Receipt this Period

200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 12 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. CHUCK, AILEEN, M, MRS, TTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8144 VILLAGE 8

City CAMARILLO	State CA	Zip Code 93012-6928
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED TEACHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321036

Amount of Each Receipt this Period
375.00

Memo Item
CONTRIBUTION

B. CICCARELLI, WILLIAM, L, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 662 OLD LINCOLN HWY

City STOYSTOWN	State PA	Zip Code 15563-6441
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320551

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. CLEGG, MARSHALL, T, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2306 WOODMEN DR

City SAN ANTONIO	State TX	Zip Code 78209-4281
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319793

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1025.00
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 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
Madison Project, Inc.

A. COLLINS, CAROLE, A, MISS, TTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5715 IVES PL

City RIVERSIDE	State CA	Zip Code 92506-3541
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320861

Amount of Each Receipt this Period
600.00

Memo Item
CONTRIBUTION

B. COLLINS, JEANNETTE, B, MS, TTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 293 TRUMBULL RD

City MANHASSET	State NY	Zip Code 11030-2116
-------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320597

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CURRAN, WILLIAM, E, MR, JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4601 HIGHWAY A1A APT 501

City VERO BEACH	State FL	Zip Code 32963-1353
--------------------	-------------	------------------------

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

Name of Employer (for Individual) HASLEY ASSOC. INC. NEW HAVEN CT	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321123

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3150.00
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 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. DAILY, ROBERT, FISHER, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1127 E DEL MAR BLVD APT 214
 City PASADENA State CA Zip Code 91106-3436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321207
 Amount of Each Receipt this Period 47.00
 Memo Item CONTRIBUTION

B. DAILY, ROBERT, FISHER, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1127 E DEL MAR BLVD APT 214
 City PASADENA State CA Zip Code 91106-3436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321208
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. DAILY, ROBERT, FISHER, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1127 E DEL MAR BLVD APT 214
 City PASADENA State CA Zip Code 91106-3436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321209
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	347.00
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 54
	<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)
Madison Project, Inc.

A. DAVIS, JOSEPH, E, MR, III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4928 GLENVIEW ST
 City CHINO HILLS State CA Zip Code 91709-7410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LANDLORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320450
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DAVIS, PATRICIA, A, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6038 STAGE COACH TRL
 City SAN ANGELO State TX Zip Code 76901-4900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320689
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. DONNELLY, RICHARD, M, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7463 DUVAL DR
 City BLOOMFIELD HILLS State MI Zip Code 48301-3622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSHKOSH Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320539
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
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 16 OF 54
	<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)
Madison Project, Inc.

A. DOUGLAS, PAUL, W, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 DOUGLAS FARM RD
 City SANFORD State NC Zip Code 27332-1950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.320196
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DUNCAN, MARGARET, R, MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4886 INTERLACHEN DR NE
 City ALEXANDRIA State MN Zip Code 56308-4592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS RETIRED LPN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.319629
 Amount of Each Receipt this Period
 180.00
 Memo Item
 CONTRIBUTION

C. DYK, LOIS, W, MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1715 DROXFORD DR
 City HOUSTON State TX Zip Code 77008-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.319700
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1430.00
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 17 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. ESPINOZA, ANTHONY, J, MR, RET
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10439 PAYETTE DR

City WHITTIER	State CA	Zip Code 90603-2426
------------------	-------------	------------------------

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

Name of Employer (for Individual) CALIF. CONST. MONT. INC.	Occupation (for Individual) CONST. MGMT.
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319468

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. EVANS, JOHN, PALMER, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 458

City INDIANOLA	State WA	Zip Code 98342-0458
-------------------	-------------	------------------------

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

Name of Employer (for Individual) CDNNX 98052	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320111

Amount of Each Receipt this Period
1200.00

Memo Item
CONTRIBUTION

C. EVANS, JULIE, ANN, MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 420 DESERT AIRE DR SW

City MATTAWA	State WA	Zip Code 99349-1961
-----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320905

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1700.00
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 18 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. FARRELL, PETER, C, DR, PHD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1936 LARCHMONT RD
 City HOUSTON State TX Zip Code 77019-3122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESMED INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321443
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. FARRELL, PETER, C, DR, PHD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1936 LARCHMONT RD
 City HOUSTON State TX Zip Code 77019-3122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESMED INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321444
 Amount of Each Receipt this Period 1250.00
 Memo Item CONTRIBUTION

C. FEAD-MINOR, MARILYN, K, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19191 HARVARD AVE APT 204B
 City IRVINE State CA Zip Code 92612-4647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321527
 Amount of Each Receipt this Period 47.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3297.00
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 19 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FEAD-MINOR, MARILYN, K, MS,

Mailing Address 19191 HARVARD AVE APT 204B

City IRVINE	State CA	Zip Code 92612-4647
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321528

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FEAD-MINOR, MARILYN, K, MS,

Mailing Address 19191 HARVARD AVE APT 204B

City IRVINE	State CA	Zip Code 92612-4647
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321529

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GIBB, JOAN, , MS,

Mailing Address 570 OCEAN DR

City JUNO BEACH	State FL	Zip Code 33408-1952
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320810

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
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 20 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. GIBB, JOAN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 570 OCEAN DR

City JUNO BEACH	State FL	Zip Code 33408-1952
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320811

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. GREENE, SCOTT, B, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1931 SEAPORT DR

City INDIANAPOLIS	State IN	Zip Code 46240-2832
----------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320115

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. HARLAN, FLOYD, L, MR, USAF RET
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1747 TOLLHOUSE LN

City CLOVIS	State CA	Zip Code 93611-0549
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320999

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	950.00
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 21 OF 54
	<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)
Madison Project, Inc.

A. HARRISON, RALPH, E, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4276

City VENTURA	State CA	Zip Code 93007-0276
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.320678

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

B. HAYDEN, MARILYN, J, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 E CALLE DE LAS BRISAS

City SCOTTSDALE	State AZ	Zip Code 85255-3762
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.320035

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. HELMERICH, PEGGY, V, MRS, II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 S YORKTOWN AVE

City TULSA	State OK	Zip Code 74114-1426
---------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.319970

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
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 22 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. HENDRICKS, JIM, G, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 421

City ETNA	State CA	Zip Code 96027-0421
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321298

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HENDRICKS, JIM, G, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 421

City ETNA	State CA	Zip Code 96027-0421
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321299

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HOLLY, DONALD, F, MR, SR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 E WILSHIRE AVE

City FULLERTON	State CA	Zip Code 92832-2041
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320730

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
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 23 OF 54
	<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)
Madison Project, Inc.

A. HOLMES, ROBERT, P, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2636 W VERMONT AVE
 City WAUKEGAN State IL Zip Code 60087-3648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320176
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HOLTON, LEYLA, GLADYS, MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10288 IRON ORE RD
 City CONROE State TX Zip Code 77303-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320080
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

C. HOLTON, LEYLA, GLADYS, MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10288 IRON ORE RD
 City CONROE State TX Zip Code 77303-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320081
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	430.00
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 24 OF 54
	<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)
Madison Project, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HORNE, FRANK, , ,		Date of Receipt
Mailing Address PO BOX 338		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2022"/>
City FAIR BLUFF	State NC	Zip Code 28439-0338
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.321483
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) INFORMATION REQUESTED PER BE		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HUBER, JOSEPH, V, MR,		Date of Receipt
Mailing Address 3645 STATE ROUTE 982		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2022"/>
City LATROBE	State PA	Zip Code 15650-3910
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.319498
Name of Employer (for Individual) CCA		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) ATTORNEY		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HUDSON, ROBERT, Y, MR, JR		Date of Receipt
Mailing Address PO BOX 370		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2022"/>
City SEBASTOPOL	State MS	Zip Code 39359-0370
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.319850
Name of Employer (for Individual) N/A		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. IRVING, THOMAS, S, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 750 MORSE LANDING DR

City CICERO	State IN	Zip Code 46034-9535
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320735

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. ISOLA, DOROTHY, A, MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2925 W 5TH ST APT 17B

City BROOKLYN	State NY	Zip Code 11224-3977
------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320164

Amount of Each Receipt this Period
306.00

Memo Item CONTRIBUTION

C. JACKSON, BRIAN, T, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7014 SHAY CT

City HIGHLAND	State CA	Zip Code 92346-7700
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319734

Amount of Each Receipt this Period
60.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	516.00
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 26 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. JAMES, LELAND, P, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2129 EAGLE WATCH DR

City HENDERSON State NV Zip Code 89012-2555

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.320109

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. JOHNSON, KENNETH, W, MR, TTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2165 STOPPER DR
JOHNSON TRUST

City MONTOURSVILLE State PA Zip Code 17754-9697

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.319497

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. KRAATZ, ROBERT, G, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 CACHE CHAPEL RD

City OLMSTED State IL Zip Code 62970-2159

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.319523

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

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 27 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. KYLE, BARBARA, E, MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 521 REDFEARN CT

City MOUNT PLEASANT	State TX	Zip Code 75455-6704
------------------------	-------------	------------------------

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

Name of Employer (for Individual) AT&T	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321295

Amount of Each Receipt this Period
240.00

Memo Item
CONTRIBUTION

B. LAVELLI, EDWARD, D, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11850 EDGEWATER DR APT 416

City LAKEWOOD	State OH	Zip Code 44107-6401
------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320833

Amount of Each Receipt this Period
235.00

Memo Item
CONTRIBUTION

C. LILLEY, BETSY, M, MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 BENT OAK TRL

City FAIRPORT	State NY	Zip Code 14450-8948
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) HOMEMAKER RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321168

Amount of Each Receipt this Period
135.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	610.00
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 28 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. LINDSTROM, WESLEY, P, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2743 171ST ST

City CURRIE	State MN	Zip Code 56123-1048
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED FARMER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319974

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. LOEWEN, DON, V, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7910 CALEDONIA DR

City SAN JOSE	State CA	Zip Code 95135-2110
------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320316

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MALLOY, RAY, K, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11752 CHERRY ST

City LOS ALAMITOS	State CA	Zip Code 90720-4102
----------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321202

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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 29 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. MATZKA, SUSAN, F, MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 978

City MULINO	State OR	Zip Code 97042-0978
----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319878

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MCGRATH, LINDA, J, MRS, TTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9319 LAKEVIEW RD
MCGRATH FAMILY TRUST

City LAKESIDE	State CA	Zip Code 92040-4715
------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320680

Amount of Each Receipt this Period
120.00

Memo Item CONTRIBUTION

C. MCMILLEN, RICK, E, DR, DDS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32941 POST AVE

City FORT BRAGG	State CA	Zip Code 95437-8423
--------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321269

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	570.00
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 30 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. MEIER, GERALD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 GILL CREEK TER

City BELOIT	State KS	Zip Code 67420-2651
----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319718

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. MILBURN, MILES, M, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8702 LOCH BEND DR APT C

City PARKVILLE	State MD	Zip Code 21234-3520
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321069

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MILLIES, RONALD, L, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1350 LUDINGTON LN

City DYER	State IN	Zip Code 46311-1665
--------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319675

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
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 31 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. MOJSA, TERESA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11001 62ND DR APT 11F
 City FOREST HILLS State NY Zip Code 11375-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320644
 Amount of Each Receipt this Period 145.00
 Memo Item CONTRIBUTION

B. MORALES, JORGE, F, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 SUNNYSIDE DR
 City JACKSONVILLE State FL Zip Code 32207-5237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319449
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MURPHY, LOIS, CRAIN, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8506 DOROTHA CT
 City AUSTIN State TX Zip Code 78759-8111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320129
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	895.00
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 32 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. MURROW, JIMMIE, L, MR, PHD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1173 S MARYLAND AVE
 City SPRINGFIELD State MO Zip Code 65807-1570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 N/A RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321367
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

B. NOSTRAND, DOLORES, M, MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1437 WYNKOOP DR
 City COLORADO SPRINGS State CO Zip Code 80909-3245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320854
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. O'NEIL, JOHN, J, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 CROSS RD
 City STORMVILLE State NY Zip Code 12582-5727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320589
 Amount of Each Receipt this Period 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1800.00
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 33 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. OLSON, CHARLES, J, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 588 CRAWFORD DR
 City SUNNYVALE State CA Zip Code 94087-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320988
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. ORINT, JOSEPH, G, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18109 WESTSIDE HWY SW
 City VASHON State WA Zip Code 98070-4435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319861
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. ORRADRE, MICHEL, J, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67100 SARGENTS RD
 City SAN ARDO State CA Zip Code 93450-8901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319652
 Amount of Each Receipt this Period 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
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 34 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. PACE, ZITA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7087 FUNKHOUSER ST
 City BONNERS FERRY State ID Zip Code 83805-8526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320238
 Amount of Each Receipt this Period 80.00
 Memo Item CONTRIBUTION

B. PURNELL, ALLEN, D, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3434 BUCK CREEK RD
 City SIMPSONVILLE State KY Zip Code 40067-6628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319646
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RANKEY, LINDA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11851 TOWNSHIP ROAD 80
 City FINDLAY State OH Zip Code 45840-9085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321286
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	530.00
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 35 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. RAYNER, CAROLYN, PAULINE, MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14800 SUGARWOOD TRAIL DR

City CHESTERFIELD	State MO	Zip Code 63017-5524
----------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320605

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. REEDY, MARY, A, MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 213 WOODSIDE DR

City CHILHOWIE	State VA	Zip Code 24319-5896
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321263

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. RICHTER, HENRY, L, DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2170 GARDEN VALLEY GLN

City ESCONDIDO	State CA	Zip Code 92026-1320
-------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320019

Amount of Each Receipt this Period
102.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2602.00
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 36 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. RIVES, ROBERT, E, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 QUAIL HOLLOW TRL

City MORRISON	State MO	Zip Code 65061-3474
------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
547.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2022

Transaction ID : SA11A.321519

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. RIVES, ROBERT, E, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 QUAIL HOLLOW TRL

City MORRISON	State MO	Zip Code 65061-3474
------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
547.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2022

Transaction ID : SA11A.321520

Amount of Each Receipt this Period
47.00

Memo Item
CONTRIBUTION

C. ROALDSON, QUENTIN, J, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2321 TIPTON RD

City ATOKA	State TN	Zip Code 38004-2776
---------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2022

Transaction ID : SA11A.320138

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	647.00
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 37 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. ROSE, KENNETH, LEON, DR, TTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23005 N 74TH ST UNIT 4031

City SCOTTSDALE	State AZ	Zip Code 85255-7521
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.321274

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. RYAN, KELSIE, W, MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6831 N VALLEY ST

City DALTON GARDENS	State ID	Zip Code 83815-8739
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.319647

Amount of Each Receipt this Period
350.00

Memo Item
CONTRIBUTION

C. SANCKEN, BARBARA, ANN, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 CRYSTAL CT

City PONTIAC	State IL	Zip Code 61764-9714
-----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.320697

Amount of Each Receipt this Period
112.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	962.00
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 38 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. SCHLORTT, ROBERT, E, MR, JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 907 CLASSEN PASS

City SAN ANTONIO	State TX	Zip Code 78258-4213
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.321113

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. SCHMIDT, STEVEN, A, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14718 SE 172ND PL

City RENTON	State WA	Zip Code 98058-8701
----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.319462

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SCHNABEL, JOAN, M, MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 216 NOTTINGHAM HL

City ANNAPOLIS	State MD	Zip Code 21405-2006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : SA11A.320232

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
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 39 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. SCHNEIDER, JUDITH, E, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7417 GILA RD NE
 City ALBUQUERQUE State NM Zip Code 87109-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319890
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. SCHROEDER, WALTER, D, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8101 LA PALMA DR
 City HUNTINGTN BCH State CA Zip Code 92646-1655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALESMAN PART-TIME
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321191
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHOEMAKER, MARY, W, MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4898 HIGHMARKET ST
 City GEORGETOWN State SC Zip Code 29440-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321235
 Amount of Each Receipt this Period 600.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. SKELTON, MICHAEL, EUGENE, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5010
 City SALEM State OR Zip Code 97304-0010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWINDS ELECTRIC CO. Occupation (for Individual) ELECTRICIAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321199
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SLEPIAN, LINDA, J, MRS, TTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 328 SCOTTSDALE DR
 City TROY State MI Zip Code 48084-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF MICHIGAN PAYS MY PENSIO Occupation (for Individual) RETIRED TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320798
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SPILLER, KARL, J, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 AARON DR
 City NOVATO State CA Zip Code 94949-5497
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.320840
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	735.00
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 41 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. SPILLER, KARL, J, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 AARON DR

City NOVATO	State CA	Zip Code 94949-5497
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.320841

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SPRANKLE, JOSEPH, F, MR, III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 FREERS CT

City CHESAPEAKE	State VA	Zip Code 23322-4260
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.319477

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

C. SQUARZINI, LUCY, ANN, MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 688 ROSSMORE CT

City GREAT FALLS	State VA	Zip Code 22066-2641
---------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.319846

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
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 42 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Madison Project, Inc.

A. STEEL, MCDOWELL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 N HILLDALE RD
 City SALINA State KS Zip Code 67401-3535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6682.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.321449
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. STEEL, MCDOWELL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 N HILLDALE RD
 City SALINA State KS Zip Code 67401-3535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6682.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.321450
 Amount of Each Receipt this Period
 47.00
 Memo Item
 CONTRIBUTION

C. STEEL, MCDOWELL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 N HILLDALE RD
 City SALINA State KS Zip Code 67401-3535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6682.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.321451
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5082.00
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 43 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. STEINKAMP, JEFFREY, S, MR, TTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 TOM WICKER LN
 City RANDOLPH CENTER State VT Zip Code 05061-6703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321501
 Amount of Each Receipt this Period 600.00
 Memo Item CONTRIBUTION

B. STEWART, ROBERT, CARY, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 VETERANS WAY
 City KNOXVILLE State TN Zip Code 37931-3161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) RET'D
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321475
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TAN, BETTY, P, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 780 BOYLSTON ST APT 6B
 City BOSTON State MA Zip Code 02199-7805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319842
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
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 44 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. TAYLOR, KARL, A, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 ASH AVE
 City CASTLE ROCK State CO Zip Code 80104-2203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319704
 Amount of Each Receipt this Period 240.00
 Memo Item CONTRIBUTION

B. TSOUROUNIS, STELLA, C, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1309 KENWOOD AVE
 City ALEXANDRIA State VA Zip Code 22302-2314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319876
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. VARGAS, JOSEPH, W, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4985 N VENTANA RIDGE PL
 City TUCSON State AZ Zip Code 85750-6069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321128
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 465.00
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 45 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. WEEKS, ANNIE, H, MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3411 ROCK LN

City IRONDALE	State AL	Zip Code 35210-3708
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.319860

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. WELCH, VAN, S, MR, II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19210 S CANYON LAKE SPRINGS DR

City CYPRESS	State TX	Zip Code 77433-3638
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.320439

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. WESTERBERG, RICHARD, H, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 HILLCREST DR

City WAYNE	State NJ	Zip Code 07470-5715
---------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : SA11A.320353

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
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 46 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. WILLINGHAM, C, HAROLD, DR, TTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6739 E CALLE CADENA
 City TUCSON State AZ Zip Code 85715-3244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319550
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WILSON, HELEN, N, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 CEDAR DR
 City CLINTON State IL Zip Code 61727-2563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.321382
 Amount of Each Receipt this Period 135.00
 Memo Item CONTRIBUTION

C. WILSON, MARGARET, A, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2230
 City EDGEWOOD State NM Zip Code 87015-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 31 / 2022
Transaction ID : SA11A.319571
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	585.00
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 47 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. WISE, ROBERT, H, MR, JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2348 RIVER GRAND DR
 City VESTAVIA State AL Zip Code 35243-2324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.320580
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. WOOD, ELLEN, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 BUCKINGHAM LN
 City ALLEN State TX Zip Code 75002-8676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.320299
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

C. ZELLMER, ARTHUR, K, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 325
 City DAVENPORT State WA Zip Code 99122-0325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ART & LINDA ZELLMER INC. Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : SA11A.319945
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	48883.00

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

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

A. AMORIN, KELLY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13505 Colesmire Gate Way

City Bristow State VA Zip Code 20136

Purpose of Disbursement Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 24 / 2022

FEC Identification Number: C

Transaction ID : 7171

Amount of Each Disbursement this Period: 1500.00

Memo Item Consulting for FEC Compliance Reporting

B. AMORIN, KELLY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13505 Colesmire Gate Way

City Bristow State VA Zip Code 20136

Purpose of Disbursement Accounting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 24 / 2022

FEC Identification Number: C

Transaction ID : 7172

Amount of Each Disbursement this Period: 50.00

Memo Item

C. CDMI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement Web Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 24 / 2022

FEC Identification Number: C

Transaction ID : 7164

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4050.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
Madison Project, Inc.

A. DIRECT MAIL FUNDRAISING

Full Name (Last, First, Middle Initial)

Mailing Address 13755 SUNRISE VALLEY DR STE 450

City
HERNDON

State
VA

Zip Code
20171-4682

Purpose of Disbursement
PAC POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	2	2

FEC Identification Number

C []
Transaction ID : SB21B.I1030!
Amount of Each Disbursement this Period
[] 14461.12

Memo Item

B. FIRST VIRGINIA COMMUNITY BANK

Full Name (Last, First, Middle Initial)

Mailing Address 11325 RANDOM HILLS RD STE 240

City
FAIRFAX

State
VA

Zip Code
22030-6068

Purpose of Disbursement
PAC BANK FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	2	2

FEC Identification Number

C []
Transaction ID : SB21B.I1030!
Amount of Each Disbursement this Period
[] 346.61

Memo Item

C. FULFILLMENT SOLUTIONS, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 44970 FALCON PLACE
SUITE 400

City
STERLING

State
VA

Zip Code
20166

Purpose of Disbursement
PAC PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	2	2

FEC Identification Number

C []
Transaction ID : SB21B.I1031
Amount of Each Disbursement this Period
[] 14857.55

Memo Item

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

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

2	9	6	6	5	.	2	8
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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

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NAME OF COMMITTEE (In Full)
Madison Project, Inc.

Full Name (Last, First, Middle Initial)
A. GLOBAL PAYMENTS INC

Date of Disbursement: MM / DD / YYYY
05 / 05 / 2022

Mailing Address 10705 RED RUN BLVD

City OWINGS MILLS State MD Zip Code 21117-5134

Purpose of Disbursement PAC CC TRANSACTION FEES

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I1030
Amount of Each Disbursement this Period: 883.89

Memo Item

Full Name (Last, First, Middle Initial)
B. IMAGE DIRECT

Date of Disbursement: MM / DD / YYYY
05 / 19 / 2022

Mailing Address 4600 WEDGEWOOD BLVD UNIT N

City FREDERICK State MD Zip Code 21703

Purpose of Disbursement PAC PRINTING

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I1030
Amount of Each Disbursement this Period: 11157.01

Memo Item

Full Name (Last, First, Middle Initial)
C. INVICTUS STRATEGIES

Date of Disbursement: MM / DD / YYYY
05 / 24 / 2022

Mailing Address 38082 Snickersville Turnpike

City Purcellville State VA Zip Code 20132

Purpose of Disbursement Consulting

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : 7165
Amount of Each Disbursement this Period: 3000.00

Memo Item Fundraising and Direct Mail Program

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15040.90

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)
Madison Project, Inc.

Full Name (Last, First, Middle Initial) A. Jim Ryun Sports		Date of Disbursement MM / DD / YYYY 05 / 24 / 2022
Mailing Address 132 D Street SE		FEC Identification Number C Transaction ID : 7166 Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Fundraising and Direct Mail Program Oversight <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Consulting		
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. Luke Berry, Inc.		Date of Disbursement MM / DD / YYYY 05 / 24 / 2022
Mailing Address 1406 Sequoia Cove		FEC Identification Number C Transaction ID : 7170 Amount of Each Disbursement this Period 516.00 <input type="checkbox"/> Memo Item
City Leander	State TX	
Purpose of Disbursement Web Service		
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. MDI IMAGING & MAIL		Date of Disbursement MM / DD / YYYY 05 / 09 / 2022
Mailing Address 21955 CASCADES PKWY		FEC Identification Number C Transaction ID : SB21B.I1030 Amount of Each Disbursement this Period 717.31 <input type="checkbox"/> Memo Item
City DULLES	State VA	
Purpose of Disbursement PAC POSTAGE		
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)..... ▶

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

6233.31

**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)
Madison Project, Inc.

Full Name (Last, First, Middle Initial)

A. MDI IMAGING & MAIL

Mailing Address 21955 CASCADES PKWY

City
DULLES

State
VA

Zip Code
20166-9211

Purpose of Disbursement
PAC POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1030!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PLANET DIRECT MAIL

Mailing Address 7251 COPPERMINE DRIVE

City
MANASSAS

State
VA

Zip Code
20109

Purpose of Disbursement
PAC POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1030!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. RST MARKETING ASSOCIATES

Mailing Address 1272 CORPORATE PARK DR.

City
FOREST

State
VA

Zip Code
24551

Purpose of Disbursement
PAC PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1030!
Amount of Each Disbursement this Period

Memo Item

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

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)
Madison Project, Inc.

Full Name (Last, First, Middle Initial)
A. RST MARKETING ASSOCIATES

Mailing Address 1272 CORPORATE PARK DR.

City FOREST State VA Zip Code 24551

Purpose of Disbursement PAC POSTAGE

Candidate Name

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

State: District:

Date of Disbursement: 05 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1030

Amount of Each Disbursement this Period: 7500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. RST MARKETING ASSOCIATES

Mailing Address 1272 CORPORATE PARK DR.

City FOREST State VA Zip Code 24551

Purpose of Disbursement PAC POSTAGE

Candidate Name

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

State: District:

Date of Disbursement: 05 / 26 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1031

Amount of Each Disbursement this Period: 4503.70

Memo Item

Full Name (Last, First, Middle Initial)
C. TRUIST-BB&T

Mailing Address 120 North Maple Avenue

City Purcellville State VA Zip Code 20132

Purpose of Disbursement Postage

Candidate Name

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

State: District:

Date of Disbursement: 05 / 23 / 2022

FEC Identification Number: C

Transaction ID : 7163

Amount of Each Disbursement this Period: 40.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12043.70

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="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)
Madison Project, Inc.

A. WASHINGTON INTELLIGENCE BUREAU

Full Name (Last, First, Middle Initial) _____

Mailing Address 4128 PEPSI PL

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement PAC CAGING & ESCROW

Candidate Name _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 12 / 2022

FEC Identification Number: C _____

Transaction ID : SB21B.I1030I

Amount of Each Disbursement this Period: 3301.33

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: MM / DD / YYYY

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: MM / DD / YYYY

FEC Identification Number: C _____

Amount of Each Disbursement this Period: _____

Memo Item

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

3301.33

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

91980.34