PAGE 1 / 12

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

I OKWI 3X	For Other Than An Au	thorized Committee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	, type	12FE4M5	
COMMUNITY HE	ALTH COUNCIL PAC DE	BA BREAST CAN	CER HEA	LTH COU	JNCIL PAC
ADDRESS (number and str	eet) 1627 K STREET NW STE 500				
Check if differen than previously reported. (ACC)	t WASHINGTON			DC	20006
2. FEC IDENTIFICATIO	ON NUMBER ▼ C	TY 🛦	STA	ATE 🛦	ZIP CODE ▲
C C00652685		IS THIS REPORT NE		AME (A)	NDED
4. TYPE OF REPOR (Choose One) (a) Quarterly Reports	Report Due On:		y 20 (M5) n 20 (M6)	Aug 2	O (M9) D (M9) D (M9) D (M9) D (M9) D (M12) (Non-Election
April 15	Ap	r 20 (M4) Jul	20 (M7)	Oct 20	Year Only) Jan 31 (YE)
Quarterly Re July 15 Quarterly Re	(C) 12-Day	Primary (12P)		General (1	2G) Runoff (12R)
October 15 Quarterly Re	Report for the:	Convention (12	C)	Special (12	2S)
January 31 Year-End Re	eport (YE) Elect	ion on	D D / Y	Y	in the State of
July 31 Mid- Report (Non- Year Only) (i	-election	General (30G)		Runoff (30	R) Special (30S)
Termination (TER)	Report	ion on	D D / Y	YYY	in the State of
5. Covering Period	11 27 2018	through	12 /	31/	2018
I certify that I have exami	ined this Report and to the best of Bass, Zachary, , ,	of my knowledge and be	lief it is true,	correct and	complete.
Type or Print Name of Tre					
Signature of Treasurer	Bass, Zachary, , ,	[Electronically F	<u>'iled]</u> Date	01	29 / 2019
NOTE: Submission of false	, erroneous, or incomplete information	on may subject the person	n signing this	Report to the	penalties of 52 U.S.C. § 30109
Office Use Only					FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

COMMUNITY HEALTH COUNCIL PAC DBA BREAST CANCER HEALTH COUNCIL PAC

11 27 2018 12 31 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 60.00 January 1. 2018 (b) Cash on Hand at 8650.09 Beginning of Reporting Period..... 299562.30 2630559.87 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 2630619.87 308212.39 6(a) and 6(c) for Column B)..... 298666.07 2621073.55 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 9546.32 9546.32 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

COMMUNITY HEALTH COUNCIL PAC DBA BREAST CANCER HEALTH COUNCIL PAC

	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)	1200.00	15937.00				
	(ii) Unitemized(iii) TOTAL (add	298362.30	2614622.87				
	Lines 11(a)(i) and (ii)	299562.30	2630559.87				
	(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)▶	299562.30	2630559.87				
. — .	Transfers From Affiliated/Other Party Committees	0.00	0.00				
13.	All Loans Received	0.00	0.00				
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00				
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00				
	to Federal Candidates and Other Political Committees	0.00	0.00				
	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00				
	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				
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	299562.30	2630559.87				
	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	299562.30	2630559.87				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tino I Gliou	Calcilual Teal-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	3.00	4 4
Expenditures	298666.07	2592873.55
(c) Total Operating Expenditures	298666.07	2592873.55
(add 21(a)(i), (a)(ii), and (b))	290000.07	2332073.33
Committees	0.00	0.00
Contributions to Federal Candidates/Committees	0.00	0.00
and Other Political Committees Independent Expenditures	0.00	0.00
(use Schedule E)	0.00	28200.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Lacas Mada		0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	4 4	4 4 4
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	,	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(2	0))	4 4
(a) Allocated Federal Election Activity	0))	
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	5.00	3.00
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	
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	298666.07	2621073.55
Total Federal Disbursements		4 4
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	298666.07	2621073.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 299562.30 2630559.87 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 2630559.87 299562.30 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 298666.07 2592873.55 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 298666.07 2592873.55 (subtract Line 37 from Line 36)

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F3XN
Transaction ID:

Our PAC makes its best efforts to collect required record keeping information for individuals who have contributed more than \$200 in a calendar year. All original solicitation contain a clear and conspicuous request for the required contributor information on reply materials with the required explanatory statement. If the information is not provided to the Committee, then we will follow up by sending a letter to the donor within 30 days of the donation requesting the missing information. This letter is sent by itself with no solicitation. It clearly requests the missing information, informs the donor that federal law requires that we report this information and includes a return envelope. We then make sure to update the records and report any additional information to the Commission prior to our next reporting date, or as memo entries in the next regularly scheduled report.

For reporting purposes we have used the term 'Donor Outreach' on our Schedule B supporting line 21(b). We have contracted multiple companies to provide 'Donor Outreach' services for us. 'DonorOutreach' services include but are not limited to FUNDRAISING ACTIVITIES, DONOR DATABASE MANAGEMENT, CAGING AND ESROW, DIRECT MAIL SERVICES, Letterhead/Envelopes/Stationary and List Acquisition

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

F	OR	LINE	NU	MBER	:	PAGE	7	12		
(0	che	ck only	or	ne)						
	X	11a		11b		11c	12	2		
		13		14		15	16	6		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	NOIL FAC DBA BREAST CANCER	R HEALTH COUNCIL PAC
Full Name of Individual (Last, First, Middle HAPP, DONALD, , ,	, ,	Date of Receipt
Mailing Address 4895 BAY ST NE APT 206		12 05 2018
City	State Zip Code	Transaction ID : SA11AI.4371
SAINT PETERSBURG	FL 33703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	400.00	
Other (specify) ▼	400.00	
Full Name of Individual (Last, First, Middle HAPP, DONALD, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 4895 BAY ST NE APT 206	5	12 10 2018
City	State Zip Code	-
SAINT PETERSBURG	FL 33703	Transaction ID : SA11AI.4370 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name of Individual (Last, First, Middle ROBERTS, DOROTHY, , , Mailing Address PO BOX 50239	Initial) or Full Organization Name	Date of Receipt
000	101.1	12 04 2018
City SANTA BARBARA	State Zip Code CA 93150	Transaction ID : SA11AI.4373
	55100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	650.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	650.00	
SUBTOTAL of Receipts This Page (optional))	800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FO	R LINE	NUMBER	:	PAGE	8	OF	12
(ch	eck only	one)					
X	1 1a	11b		11c	12		
	13	14		15	16		17

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

or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
/	NCIL PAC DBA BREAST CANCER	R HEALTH COUNCIL PAC
Full Name of Individual (Last, First, Middle STETWILER, PAT, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 186 ARANDALE ST		12 04 2018
City BEDFORD	State Zip Code PA 15522	Transaction ID : SA11AI.4375
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 300.00
Name of Employer (for Individual) Best Efforts	Occupation (for Individual) Best Efforts	Memo Item
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify) ▼ Full Name of Individual (Last, First, Middle	4 4	
THOMPSON, JANICE, , , Mailing Address 160 S MAIN ST		Date of Receipt
City	State Zip Code	12 12 2018 Transaction ID : SA11Al.4367
RUTHERFORDTON	NC 28139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Homemaker	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		400.00
TOTAL This Period (last page this line numb	er only)	1200.00

S 17

SCHEDULE B (FEC Form 3X)	Han	wata ach adula (a)	FOR LINE	LINE NUMBER: PAGE 9 OF 12				
ITEMIZED DISBURSEMENTS	for each	rate schedule(s) category of the	(check only					
	Detailed	Summary Page	28a	28b 28c	29 30b			
Any information copied from such Reports and Sta								
or for commercial purposes, other than using the n	ame and addr	ess of any politic	ai committee to	solicit contributions fro	om such committee.			
NAME OF COMMITTEE (In Full) COMMUNITY HEALTH COUNCI	L PAC DE	BA BREAST	CANCER	HEALTH COUN	NCIL PAC			
Full Name (Last, First, Middle Initial)								
A. Action Committee Marketing LLC	•			Date of Disburseme	nt /			
Mailing Address 698 Old Commons Dr		1		12 31	_2018			
City Greenwood	State	Zip Code 46142		FEC Identification N	lumber			
Purpose of Disbursement	"'	40142		С				
Donor Outreach				Transaction ID	: SB21B.4382			
Candidate Name			Category/		sbursement this Period			
Office Sought: House Disburs	sement For:		Type		38558.84			
Senate	Primary	General		7	4 4			
President State: District:	Other (spec	cify) ▼		Memo Item				
Full Name (Last, First, Middle Initial)								
B. AMERICAN PUBLIC RESOURC	E LLC			Date of Disburseme				
Mailing Address 3855 S. 500 WEST, STE D				12 31 2018				
City	State	Zip Code		FEC Identification N	lumber			
SOUTH SALT LAKE Purpose of Disbursement	UT	84115		С				
Donor Outreach				Transaction ID : SB21B.4383 Amount of Each Disbursement this Period 64727.09				
Candidate Name			Category/					
Office Sought: House Disburs	sement For:		Туре					
Senate	Primary	General		4	4 4			
State: President District:	Other (spec	cify)		Memo Item				
Full Name (Last, First, Middle Initial)								
C. Bristol Marketing Associates Inc				Date of Disburseme				
Mailing Address 8051 N. Tamiami Trail, Box 2				12 31	2018			
City	State	Zip Code		FEC Identification N	lumber			
Sarasota Purpose of Disbursement	FL	34243			1 1 1			
Donor Outreach				Transaction ID	: SB21B.4384			
Candidate Name			Category/ Type	Amount of Each Dis	sbursement this Period			
	sement For:				60.00			
Senate President	Other (spec	General						
State: District:	Other (spec	211 y) ▼		Memo Item				
SUBTOTAL of Disbursements This Page (optional)				103345.93			
SOBIOTAL OF DISDUISEMENTS THIS Page (optional)		<u> </u>	7	7			
TOTAL This Period (last page this line number on	lv)							

17

SCHEDULE B (FEC Form 3X)	\(\alpha\) -	NUMBER: PAGE 10 OF	12				
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the	1 (0110011 0111)	' '				
	Detailed Summary Pag		22 23 26 27 28b 28c 29 30b				
Any information copied from such Departs and Chateren	nonte may not be sold a			ne.			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
COMMUNITY HEALTH COUNCIL	PAC DBA BREA	ST CANCER	HEALTH COUNCIL PAC				
Full Name (Last, First, Middle Initial)			B (B) .				
A. GSI, INC			Date of Disbursement				
Mailing Address 6655 Chicago Rd, Suite 9			12 31 2018				
City	State Zip Code		FEC Identification Number				
Warren	MI 48092						
Purpose of Disbursement Donor Outreach			C				
Candidate Name			Transaction ID : SB21B.4385	and an all			
		Category/ Type	Amount of Each Disbursement this Pe	riod			
Office Sought: House Disbursen	nent For:	712	12522.04				
	Primary Genera	al	7				
	Other (specify) ▼		Memo Item				
State: District:							
Full Name (Last, First, Middle Initial) B. MARKET PROCESS GROUP			Date of Disbursement				
B. MARKET PROCESS GROUP			M M / D D / Y Y Y Y				
Mailing Address 1250 Connecticut Ave, NW, Suite 2	 20		12 312018				
				_			
,	State Zip Code		FEC Identification Number				
Washington Purpose of Disbursement	DC 20036						
Donor Outreach			C				
Candidate Name		Category/	Transaction ID : SB21B.4386 Amount of Each Disbursement this Pe	riod			
		Type	Amount of Each Disbursement this Te	TIOU			
Office Sought: House Disbursen	nent For:	•	153738.10				
	Primary General	al					
President State: District:	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial)							
C. OSIDC			Date of Disbursement				
			M M / D D / Y Y Y Y	7			
Mailing Address 1627 K ST. N.W.			11 30 2018				
City	State Zip Code		FEC Identification Number				
WASHINGTON	DC 20006						
Purpose of Disbursement RENT			C				
Candidate Name			Transaction ID : SB21B.4387	ا ماسا			
Salidado Hamo		Category/ Type	Amount of Each Disbursement this Pe	riod			
Office Sought: House Disbursen	nent For:	, , , , ,	60.00				
Senate	Primary Genera	al	7 7 7				
	Other (specify) ▼		Memo Item				
State: District:							
			166320.14				
SUBTOTAL of Disbursements This Page (optional)		······	100320.14				
TOTAL This Period (last page this line number only).							

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SC	CHEDULE B (FEC Form 3X)		F	OR I	INF N	NUMBER: PAGE 11 OF 12							
ITI	EMIZED DISBURSEMENTS		arate schedule(s)		heck	only	only one)						
	-		for each category of the Detailed Summary Page			21b	22		23		26	27 20h	
<u> </u>		1 .		<u> </u>		28a	28b		28c	Ļ	29	30b	
	y information copied from such Reports and State for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full)	D			~			_			~ =		
	COMMUNITY HEALTH COUNCIL	. PAC DE	BA BREAST	CAI	NC —	ĒR	HEAL ———	ΤН	CO	UN ⁽	CIL F	AC ——	
Δ	Full Name (Last, First, Middle Initial)						Date	of Di	isburse	man			
Λ.	Tampa Media Marketing						M	_	D			Y	V
	Mailing Address 7320 E Fletcher Ave						11			0	Ĺ	2018	
	City	State	Zip Code				FEC I	dent	ificatio	n Nu	mber		
	TAMPA Purpose of Disbursement	FL	33637					-	-	-	-	-	
	Media Consulting			Г.			C	_					
	Candidate Name			Cate	agor	v/					SB21B urseme	.4381 ent this I	Period
					уре	,.	-						-
		ement For:	Conoral						7	_	7	8000.0	00
	Senate President	Primary Other (spec	General Cify) ▼										
	State: District:	(opo	- J/ V				M	emo	Item				
	Full Name (Last, First, Middle Initial)												
В.	Tampa Media Marketing						Date of Disbursement 12 07 2018						
	Mailing Address 7320 E Fletcher Ave												
	7320 E FIELDHEF AVE					12 07 2010							
	City	State	Zip Code				FEC I	dent	ificatio	n Nu	mber		
	TAMPA Purpose of Disbursement		FL 33637										
	Media Consulting						Transaction ID: SB21B.4388 Amount of Each Disbursement this Period 6000.00						
	Candidate Name		Category/ Type										
	Office Sought: House District	mont For											
	Office Sought: House Disburse Senate	ement For: Primary					8000.00						,0
	President	Other (specify)					Memo Item						
	State: District:						IVI	61110	ileill				
_	Full Name (Last, First, Middle Initial)						Dota	of D	isburse	me			
U.	Tampa Media Marketing											Y	V
	Mailing Address 7320 E Fletcher Ave						12	/	1	4	Ĺ	2018	
	City	State	Zip Code				FFC I	dent	ificatio	n Nu	mber		
	TAMPA Purpose of Disbursement	FL	33637									-	
	Media Consulting			Г.		\neg	C	_		15	00015	4000	
	Candidate Name			Cate	egon	v/					SB21B urseme	. .4389 ent this I	Period
					ype	,.	-						
		ement For:	Consest							_	7	3000.0)()
	Senate President	Primary Other (spec	General Cify) ▼										
	State: District:	Other (specify)				Memo Item							
Г								-	-	_	-	-	
s	UBTOTAL of Disbursements This Page (optional).					•		_	7		_	17000.	00
_	OTAL This Period (last page this line number only	<i>(</i>)					Π.				-		

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SCHEDULE B (FEC			FOR LINE NUMBER: PAGE 12 OF 12						
ITEMIZED DISBURSE		arate schedule(s) category of the	I ` ·	(check only one) X 21b 22 23 26					
			Detailed Summary Page		22 23 28b 28c	26 27 29 30b			
Any information copied from suc	h Poports and State	monte may	not be sold or us	od by any pers					
or for commercial purposes, other									
NAME OF COMMITTEE (In F	,								
COMMUNITY HEAL	TH COUNCIL	PAC DE	BA BREAST	CANCER	HEALTH CO	UNCIL PAC			
Full Name (Last, First, Middle	· · · · · · · · · · · · · · · · · · ·				Data of Diabuma				
A. Tampa Media Marke	eting				Date of Disburs				
Mailing Address 7320 E Fletch	ner Ave				12	21 2018			
City		State FL	Zip Code		FEC Identification	n Number			
TAMPA Purpose of Disbursement		ΓL	33637						
Media Consulting					C	ID - CD24D 4200			
Candidate Name				Category/		n ID : SB21B.4390 Disbursement this Period			
Office Occupies	1 8: :			Туре		6000.00			
Office Sought: House Senate		ement For: Primary	General			0000.00			
Presid		Other (spe			□ M No.				
State: District:		1			Memo Item				
Full Name (Last, First, Middle									
B. Tampa Media Marke	Tampa Media Marketing Mailing Address 7320 E Fletcher Ave				Date of Disbursement				
Mailing Address 7220 E Flate					12 28 2018				
Walling Addiess / 320 E FIETO	HEI AVE					2010			
City		State	Zip Code		FEC Identification	on Number			
TAMPA Purpose of Disbursement		FL	33637						
Media Consulting					C				
Candidate Name				Category/		ID: SB21B.4391 Disbursement this Period			
				Туре					
Office Sought: House		ement For:	Gonoral		7	6000.00			
Senati Presid		Primary Other (spe	General cify)		_				
State: District:] C (Ope	c,,		Memo Item				
Full Name (Last, First, Middle	Initial)								
C.					Date of Disburs	ement			
Mailing Address					M M / D	D / Y Y Y Y			
Mailing Address									
City		State	Zip Code		FEC Identification	on Number			
Purpose of Disbursement						* * * * *			
ruipose oi Dispursement					C				
Candidate Name			Category/	Amount of Each	Disbursement this Period				
			Type	, and an each	2.05diocition tillo i oriod				
Office Sought: House	ement For:				7 1 7				
Senate Presid		Primary	General						
State: District:	ent _	Other (spe	city) \blacktriangledown		Memo Item				
2.0									
SUBTOTAL of Disbursements 1	his Page (optional).			·····		12000.00			
						200666 07			
TOTAL This Period (last page t	his line number only	/)				298666.07			