GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission 00080283	ı Filers)	1	2 Total pages file 122	
3	COMMITTEE NAME					T	OFFICE U	SE ONLY
	Bank of America S	tate and Federal PAC					Date Received ELECTRONICAL 10/28/2024	
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; C	ITY;	STATE;	ZIP CODE			
	ADDRESS	2951 Centerville Rd, Suite 300				ŀ	Date Hand-delivered or D	ate Postmarked
	Change of Address	DE9-295-03-02						
		Wilmington, DE 19808				ľ	Receipt #	Amount
							Date Processed	
							Date Imaged	
5	CAMPAIGN	MS / MRS / MR FIRST				Ν	ЛІ	
	TREASURER NAME	Ms. Wendy Y.						
		NICKNAME LAST Jamison					SUFFIX	
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)		ADT / S	SUITE #; CITY	/.	STAT	E; ZIP CODE
ľ	TREASURER	2951 Centerville Rd, Suite 300	,	74 17 2		,	01/1	
	STREET ADDRESS	DE9-295-03-02						
	(Residence or Business)	Wilmington, DE 19808						
7	CAMPAIGN	STREET OR PO BOX;		APT /	SUITE #; CIT	۲;	STA	TE; ZIP CODE
	TREASURER MAILING	2951 Centerville Rd, Suite 300						
	ADDRESS	DE9-295-03-02						
	Change of Address	Wilmington, DE 19808						
8	CAMPAIGN	AREA CODE PHONE NUMBER	ΕX	TENSION				
	TREASURER PHONE	(302) 432-0956						
9	REPORT TYPE	January 15	30th	day before election			Dissolution (Attach	PAC-DR)
			8th d	ay before election]		10th day after cam	baign treasurer
		July 15	Runc	ff	I		termination	
					Marath Dav		Veer	
10	PERIOD COVERED	Month Day Year 07/01/2024	THR	OUGH	Month Day 10/26/20		Year	
11	ELECTION	ELECTION DATE		-	ELECTION TYPE		_	
		Month Day Year	Prin	lary	Runoff		Other	
		11/05/2024	Gen	eral	Special			
┢		I I						
	GO TO PAGE 2							
Fo	rms provided by Tex	xas Ethics Commission www.	ethio	cs.state.tx.us			Versio	n V4.1.0.48da51f

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Bank of America State a	and Federal PAC		0008028	3
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported See Schedule F-1 See Schedu	le F-1	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	24,090.51
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	41,674.41
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	36,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	55,661.18
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of pe true and correct and includes all inform under Title 15, Election Code.		
		Ms. Wendy	Y. Jamisor	ı
		Signature of Car	npaign Treas	surer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, tł	nis the	day
of	, 20, to certify v	vhich, witness my hand and seal of office.		
Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title of of	ficer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7

FORM GPAC COVER SHEET PG 3

3 of 122

17 COMMITTE	EE NAME	18 Filer ID	(Ethics Commission Filers)
Bank of A	merica State and Federal PAC	00080283	
	ESUBTOTALS		SUBTOTAL AMOUNT
NAME OF	SCHEDULE		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 40,310.41
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$ 1,364.00
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$ 36,000.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

SUBTOTALS - GPAC

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/108 Rpt: 4/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/15/2024			\$25.0
	6 Contributor address; City; State; Zip Code		
	BAKERSFIELD, CA 93309		
8 Principal occi	upation / Job title (See Instructions)	9 Employer (See Instructions)
Sr Resident	t Dir - Wealth Mgmt	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024			\$25.0
	Contributor address; City; State; Zip Code		
	BAKERSFIELD, CA 93309		
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions)
Sr Resident	t Dir - Wealth Mgmt	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024	—		\$25.0
	Contributor address; City; State; Zip Code		
	BAKERSFIELD, CA 93309		
•	upation / Job title (See Instructions)	Employer (See Instructions)
Sr Resident	t Dir - Wealth Mgmt	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024			\$25.0
	Contributor address; City; State; Zip Code		
	BAKERSFIELD, CA 93309		
	upation / Job title (See Instructions)	Employer (See Instructions)
Sr Resident	t Dir - Wealth Mgmt	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/15/2024	Amstutz, Douglas		\$25.0
	Contributor address; City; State; Zip Code		
	BAKERSFIELD, CA 93309		
	upation / Job title (See Instructions)	Employer (See Instructions))
Sr Resident	t Dir - Wealth Mgmt	Bank of America	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/108 Rpt: 5/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/30/2024	Amstutz, Douglas		\$25.0
	6 Contributor address; City; State; Zip Code		
	BAKERSFIELD, CA 93309		
-	ipation / Job title (See Instructions)	9 Employer (See Instructions)
Sr Resident	Dir - Wealth Mgmt	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024	Amstutz, Douglas		\$25.0
	Contributor address; City; State; Zip Code		
	BAKERSFIELD, CA 93309		
	upation / Job title (See Instructions)	Employer (See Instructions)
Sr Resident	Dir - Wealth Mgmt	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024	Austin, Michael		\$20.0
	Contributor address; City; State; Zip Code		
	CONCORD, CA 94520		
	Ipation / Job title (See Instructions)	Employer (See Instructions)
Sr Tech Mgr	-Generalist	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024	Austin, Michael		\$20.0
	Contributor address; City; State; Zip Code		
	CONCORD, CA 94520		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	() ()
Sr Tech Mgr		Bank of America	,
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
08/15/2024	Austin, Michael	/	\$20.0
	Contributor address; City; State; Zip Code		
	CONCORD, CA 94520		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))
Sr Tech Mgr	-Generalist	Bank of America	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/108 Rpt: 6/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/31/2024	Austin, Michael		\$20.0
	6 Contributor address; City; State; Zip Code		
	CONCORD, CA 94520		
Dringinglaggy		C Employer (Cap Instructions	
Sr Tech Mgi	upation / Job title (See Instructions)	 9 Employer (See Instructions Bank of America)
Si reciringi			
Date)	Amount of Contribution (\$)
09/15/2024	Austin, Michael		\$20.0
	Contributor address; City; State; Zip Code		
	CONCORD, CA 94520		
-	upation / Job title (See Instructions)	Employer (See Instructions	
Sr Tech Mgi	r-Generalist	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/30/2024	Austin, Michael		\$20.0
	Contributor address; City; State; Zip Code		
	CONCORD, CA 94520		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)
Sr Tech Mgi	r-Generalist	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024	Austin, Michael	/	\$20.0
	Contributor address; City; State; Zip Code		
	CONCORD, CA 94520		
Principal occu	Jupation / Job title (See Instructions)	Employer (See Instructions	.)
Sr Tech Mgi		Bank of America	,
Date		\	Amount of Contribution (\$)
07/15/2024	Full name of contributor out-of-state PAC (ID#: Beacham, Todd)	Amount of Contribution (\$) \$25.0
07/15/2024			φ23.0
	Contributor address; City; State; Zip Code		
	PORTLAND, ME 04101		
Dringinglass		Employor (Cas Instructions	
-	upation / Job title (See Instructions)	Employer (See Instructions Bank of America	<i>)</i>
	g Market Mgr	Dalik ULAIIIEIICa	

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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/108 Rpt: 7/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/31/2024	Beacham, Todd		\$25.00
	6 Contributor address; City; State; Zip Code		
	PORTLAND, ME 04101		
-	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)
Bus Banking	Market Mgr	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/15/2024	Beacham, Todd		\$25.00
	Contributor address; City; State; Zip Code		
	PORTLAND, ME 04101		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
Bus Banking) Market Mgr	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/31/2024	Beacham, Todd		\$25.00
	Contributor address; City; State; Zip Code		
	PORTLAND, ME 04101		
	ipation / Job title (See Instructions)	Employer (See Instructions	.)
Bus Banking	Market Mgr	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024	Beacham, Todd		\$25.00
	Contributor address; City; State; Zip Code		
	PORTLAND, ME 04101	1	
	ipation / Job title (See Instructions)	Employer (See Instructions	<i>;</i>)
Bus Banking	/ Market Mgr	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/15/2024	Beazley, Kelly		\$60.00
	Contributor address; City; State; Zip Code		
	RICHMOND, VA 23219		
	upation / Job title (See Instructions)	Employer (See Instructions	5)
Senior Publi	c Policy Lead	Bank of America	

The Instruction Guid	le explains how to co	omplete this fo	rm.		Total pages Schedule A1: Sch: 5/108 Rpt: 8/122	
2 FILER NAME					- Filer ID (Ethics Commission	Filers)
Bank of America State a	Ind Federal PAC				00080283	
4 Date 5 Full name	e of contributor	-of-state PAC (ID#:)	7 /	Amount of Contribution (\$)	
07/31/2024 Beazley						\$60.00
6 Contribut	tor address; City; State; Zip			1		
RICHM	OND, VA 23219					
8 Principal occupation / Job ti			9 Employer (See Instructions	s)		
Senior Public Policy Lea	ιd		Bank of America			
Date Full name	e of contributor	of-state PAC (ID#:)	/	Amount of Contribution (\$)	
08/15/2024 Beazley	r, Kelly					\$60.00
Contribut	tor address; City; State; Zip			1		
	OND, VA 23219					
Principal occupation / Job ti			Employer (See Instructions	s)		
Senior Public Policy Lea	ıd		Bank of America			
Date Full name	e of contributor	-of-state PAC (ID#:)	4	Amount of Contribution (\$)	
08/31/2024 Beazley						\$60.00
Contribut	tor address; City; State; Zip			1		
	OND, VA 23219	I				
Principal occupation / Job ti	· · · · ·		Employer (See Instructions	s)		
Senior Public Policy Lea	ι d		Bank of America			
		-of-state PAC (ID#:)	Τ /	Amount of Contribution (\$)	
09/15/2024 Beazley						\$60.00
Contribut	tor address; City; State; Zip]		
RICHM	OND, VA 23219					
Principal occupation / Job ti	itle (See Instructions)		Employer (See Instructions	s)		
Senior Public Policy Lea	ιd		Bank of America			
Date Full name	e of contributor 🛛 out	-of-state PAC (ID#:)	4	Amount of Contribution (\$)	
09/30/2024 Beazley						\$60.00
Contribut	tor address; City; State; Zip	o Code				
	-					
RICHMO	OND, VA 23219					
Principal occupation / Job ti	itle (See Instructions)		Employer (See Instructions	s)		
Senior Public Policy Lea	ιd		Bank of America			
		·				

The	Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 6/108 Rpt: 9/122
2 FILEF	R NAME			3 Filer ID (Ethics Commission Filers)
		erica State and Federal PAC		00080283
4 Date		5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/1	5/2024	Beazley, Kelly		\$60.00
		6 Contributor address; City; State; Zip Code		1
		RICHMOND, VA 23219		
		pation / Job title (See Instructions)	9 Employer (See Instructions	5)
Seni	or Public	c Policy Lead	Bank of America	
Date		Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/1	5/2024	Berens, Henry		\$25.00
		Contributor address; City; State; Zip Code		•
		JACKSONVILLE, FL 32256		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
Busii	ness Ex	ec - Operations	Bank of America	
Date		Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/3	1/2024	Berens, Henry		\$25.00
		Contributor address; City; State; Zip Code		1
		JACKSONVILLE, FL 32256	i	
		pation / Job title (See Instructions)	Employer (See Instructions	5)
Busi	ness Ex	ec - Operations	Bank of America	
Date		Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/1	5/2024	Berens, Henry		\$25.00
		Contributor address; City; State; Zip Code		
Drinoi	' <u> </u>	JACKSONVILLE, FL 32256		<u> </u>
		pation / Job title (See Instructions) ec - Operations	Employer (See Instructions Bank of America	5)
		· —		1
Date		Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/33	1/2024	Berens, Henry		\$25.00
		Contributor address; City; State; Zip Code		
Drinoi	taal oogu	JACKSONVILLE, FL 32256		
		pation / Job title (See Instructions) ec - Operations	Employer (See Instructions Bank of America	5)
Busi			Dalik Ul America	

The Inst	ruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 7/108 Rpt: 10/122	
2 FILER NAM	1		3 Filer ID (Ethics Commission Filers	S)
Bank of A	merica State and Federal PAC		00080283	
4 Date 09/15/202	5 Full name of contributor out-of-state PAC (ID#: 4 Berens, Henry)	7 Amount of Contribution (\$) \$2!	5.00
-	6 Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
	ccupation / Job title (See Instructions)	9 Employer (See Instructions)	
Business	Exec - Operations	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)	
09/30/202	4 Berens, Henry		\$2	5.00
	JACKSONVILLE, FL 32256			
Principal or	ccupation / Job title (See Instructions)	Employer (See Instructions)	
Business	Exec - Operations	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/202	— — —			5.00
	Contributor address; City; State; Zip Code JACKSONVILLE, FL 32256			
Principal or	cupation / Job title (See Instructions)	Employer (See Instructions)	
Business	Exec - Operations	Bank of America		
Date 07/15/202	Full name of contributor out-of-state PAC (ID#:_ 4 Bickel, Keith Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$50	60.00
	WASHINGTON, DC 20006			
Principal or	cupation / Job title (See Instructions)	Employer (See Instructions)	
Public Pol	icy Executive I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/31/202	4 Bickel, Keith		\$5	0.00
	Contributor address; City; State; Zip Code WASHINGTON, DC 20006			
Principal or	ccupation / Job title (See Instructions)	Employer (See Instructions)	
	icy Executive I	Bank of America		
		•		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/108 Rpt: 11/122	
2 FILER NAME			3 Filer ID (Ethics Commission I	Filers)
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/15/2024	Bickel, Keith			\$50.00
	6 Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Public Policy	/ Executive I	Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Bickel, Keith			\$50.00
	WASHINGTON, DC 20006			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Public Policy	/ Executive I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024	Bickel, Keith			\$50.00
	WASHINGTON, DC 20006			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
Public Policy	/ Executive I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024	Bickel, Keith			\$50.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
	pation / Job title (See Instructions)	Employer (See Instructions))	
Public Policy	/ Executive I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Bickel, Keith			\$50.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Public Policy	/ Executive I	Bank of America		
		•		

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 9/108 Rpt: 12/122	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/15/2024	Brown, Margaret		\$	\$20.00
	6 Contributor address; City; State; Zip Code			
	SAINT LOUIS, MO 63101			
	upation / Job title (See Instructions)	9 Employer (See Instructions	(;	
GWIM Cred	it Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	Brown, Margaret		\$	\$20.00
	Contributor address; City; State; Zip Code			
	SAINT LOUIS, MO 63101			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
GWIM Cred	it Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/2024	Brown, Margaret			620.00
	Contributor address; City; State; Zip Code			
	SAINT LOUIS, MO 63101			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	l;)	
GWIM Cred		Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Brown, Margaret	/		\$20.00
00,01,	Contributor address; City; State; Zip Code			20.01
	Continuutor address, City, State, Zip Code			
	SAINT LOUIS, MO 63101			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L 3)	
GWIM Cred		Bank of America	,	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
09/15/2024	Brown, Margaret	/		\$20.00
00/10/202	Contributor address; City; State; Zip Code			20.00
	Continuutor address, City, State, Zip Code			
	SAINT LOUIS, MO 63101			
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
GWIM Credi		Bank of America	7	
		Built of Autorica		

Bank of America State and Federal PAC 00080283				
Bank of America State and Federal PAC 00080283 4 Date 5 Full name of contributor out-of-state PAC (IDII) 7 Amount of Contribution (S) 99/30/2024 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (S) \$20,00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (S) \$20,00 Out Full name of contributor out-of-state PAC (IDII) Amount of Contribution (S) \$20,00 Date Full name of contributor out-of-state PAC (IDII) Amount of Contribution (S) \$20,00 Contributor address; City; State; Zip Code SAINT LOUIS, MO 63101 \$20,00 \$20,00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (S) \$20,00 GWIM Credit Manager Saint LOUIS, MO 63101 Out-of-state PAC (IDII) Amount of Contribution (S) \$20,00 07/15/2024 Full name of contributor out-of-state PAC (IDII) Amount of Contribution (S) \$45,00 07/15/2024 Full name of contributor out-of-state PAC (IDII) Amount of Contribution (S) \$45,00 07/15/2024 Full name of contributor out-of-state PAC (IDII)	The Instruc	tion Guide explains how to complete this f	orm.	
Bank of America State and Federal PAC 00080283 4 Date 5 Full name of contributor out-of-state PAC (IDI:::::::::::::::::::::::::::::::::::	2 FILER NAME			
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2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
07/31/2024 Bryant, Ryland	\$25.00
6 Contributor address; City; State; Zip Code	
SAN ANTONIO, TX 78257	
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Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257 Principal occupation / Job title (See Instructions) Wealth Management Advisor Date Full name of contributor 09/30/2024 Bryant, Ryland	mployer (See Instructions) ank of America) Amount of Contribution (\$)
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257 Principal occupation / Job title (See Instructions) Wealth Management Advisor Date Full name of contributor 09/30/2024 Bryant, Ryland	mployer (See Instructions) ank of America) Amount of Contribution (\$)
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257 Principal occupation / Job title (See Instructions) Wealth Management Advisor Date Full name of contributor 09/30/2024 Bryant, Ryland	mployer (See Instructions) ank of America) Amount of Contribution (\$)
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257 Principal occupation / Job title (See Instructions) Wealth Management Advisor Date Full name of contributor 09/30/2024 Bryant, Ryland Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	mployer (See Instructions) ank of America) Amount of Contribution (\$)

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 13/108 Rpt: 16/122
2 FILER NAME Bank of Ame	erica State and Federal PAC		3 Filer ID (Ethics Commission Filers) 00080283
10/15/2024			7 Amount of Contribution (\$) \$25.00
	SAN ANTONIO, TX 78257		
	pation / Job title (See Instructions) agement Advisor	9 Employer (See Instructions) Bank of America)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024	Burnett, Robert Contributor address; City; State; Zip Code LITTLE ROCK, AR 72212		\$22.00
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)	;)
GCB Sr Rela	ationship Manager-R	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024	Burnett, Robert Contributor address; City; State; Zip Code		\$22.00
	LITTLE ROCK, AR 72212		
	pation / Job title (See Instructions) ationship Manager-R	Employer (See Instructions) Bank of America)
Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:_ Burnett, Robert		Amount of Contribution (\$) \$22.00
	Contributor address; City; State; Zip Code		
	LITTLE ROCK, AR 72212]	
	pation / Job title (See Instructions) ationship Manager-R	Employer (See Instructions) Bank of America)
Date 08/31/2024	Full name of contributor out-of-state PAC (ID#: Burnett, Robert Contributor address; City; State; Zip Code LITTLE ROCK, AR 72212		Amount of Contribution (\$) \$22.00
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>
	ationship Manager-R	Bank of America	,

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 14/108 Rpt: 17/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Bank of Ame	erica State and Federal PAC		00080283	
4 Date 09/15/2024	5 Full name of contributor out-of-state PAC (ID#: Burnett, Robert)	7 Amount of Contribution (\$) \$2	22.00
	6 Contributor address; City; State; Zip Code			
	LITTLE ROCK, AR 72212			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	
GCB Sr Rela	ationship Manager-R	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/30/2024	Burnett, Robert		\$2	22.00
	Contributor address; City; State; Zip Code			
	LITTLE ROCK, AR 72212			
	ipation / Job title (See Instructions)	Employer (See Instructions)	
GCB Sr Rel	ationship Manager-R	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/15/2024	Burnett, Robert		\$2	22.00
	Contributor address; City; State; Zip Code			
	LITTLE ROCK, AR 72212			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	
GCB Sr Rela	ationship Manager-R	Bank of America		
Date 07/15/2024	Full name of contributor out-of-state PAC (ID#: Carlisle, James)	Amount of Contribution (\$)	30.00
01110/2024	Contributor address; City; State; Zip Code		40	0.00
	Contributor address, City, State, Zip Code			
	WASHINGTON, DC 20006			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	
Public Policy	y Executive I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/31/2024	Carlisle, James			30.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions)	
-	y Executive I	Bank of America		
		1		

The Instru	uction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 15/108 Rpt: 18/122	
2 FILER NAME			3 Filer ID (Ethics Commission F	Filers)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/15/2024	Carlisle, James			\$80.00
	6 Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Public Polic	y Executive I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	—			\$80.00
	WASHINGTON, DC 20006			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions))	
Public Polic	y Executive I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/15/2024		/	/	\$80.00
	Contributor address; City; State; Zip Code			+ octobe
	Contributor address, City, State, Zip Code			
	WASHINGTON, DC 20006			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
	y Executive I	Bank of America	'	
Date	-)	Amount of Contribution (\$)	
09/30/2024		/	Amount of Contribution (\$)	\$80.00
03/00/202 .				Ψ00.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
-	y Executive I	Bank of America	!	
			Amount of Contribution (\$)	
Date 10/15/2024)	Amount of Contribution (\$)	\$80.00
10/13/2024				φου.υυ
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
	y Executive I	Bank of America)	

The Instru	uction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 16/108 Rpt: 19/122	
2 FILER NAME	Ē		3 Filer ID (Ethics Commission Filers	s)
	nerica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
07/15/2024	Ciappina, Antonino		\$2	25.00
	6 Contributor address; City; State; Zip Code			
	JERSEY CITY, NJ 07302			
	cupation / Job title (See Instructions)	9 Employer (See Instructions	5)	
EAC Comp	liance & Operational Risk M	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/31/2024			\$2	25.00
	Contributor address; City; State; Zip Code			
	JERSEY CITY, NJ 07302			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
EAC Comp	liance & Operational Risk M	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)	
08/15/2024			\$2	25.00
	Contributor address; City; State; Zip Code			
	JERSEY CITY, NJ 07302			
	cupation / Job title (See Instructions)	Employer (See Instructions	3)	
EAC Comp	liance & Operational Risk M	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/31/2024	Ciappina, Antonino		\$2	25.00
	Contributor address; City; State; Zip Code			
	JERSEY CITY, NJ 07302			
	cupation / Job title (See Instructions)	Employer (See Instructions	3)	
EAC COMp	liance & Operational Risk M	Bank of America	•	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	_
09/15/2024			\$2	25.00
	Contributor address; City; State; Zip Code			
	JERSEY CITY, NJ 07302	1		
	cupation / Job title (See Instructions)	Employer (See Instructions	3)	
EAC Comp	liance & Operational Risk M	Bank of America		

The Instru	uction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 17/108 Rpt: 20/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	- nerica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/15/2024	Cooper, Christine		\$25.00
	6 Contributor address; City; State; Zip Code		
	NEWARK, DE 19713		
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions))
Card Group	Sales Executive	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/31/2024	— —	,	\$25.00
	NEWARK, DE 19713		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))
Card Group	Sales Executive	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024			\$25.00
	Contributor address; City; State; Zip Code		
	NEWARK, DE 19713		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))
Card Group	Sales Executive	Bank of America	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024			\$25.00
	Contributor address; City; State; Zip Code		
	NEWARK, DE 19713		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))
Card Group	Sales Executive	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024	— —		\$25.00
	Contributor address; City; State; Zip Code		
	NEWARK, DE 19713		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))
Card Group	Sales Executive	Bank of America	

	The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 18/108 Rpt: 21/122	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		erica State and Federal PAC			00080283	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/30/2024	Cooper, Christine				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		NEWARK, DE 19713				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Card Group	Sales Executive	Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Cooper, Christine				\$25.00
				·		
		NEWARK, DE 19713				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		Sales Executive	Bank of America			
	Date	Full name of contributor Out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	07/15/2024	Crawford, Ken	/			\$25.00
	0.,20.222	Contributor address; City; State; Zip Code		·		+-------------
		ROSEVILLE, CA 95661				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Senior Finar		Bank of America			
	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/31/2024	Crawford, Ken	/			\$25.00
	002.222	Contributor address; City; State; Zip Code		·		+-C (1)
		CUltimbutor address, City, State, Zip Code				
		ROSEVILLE, CA 95661				
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Senior Finar		Bank of America			
	Date	Full name of contributor Out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/15/2024	Crawford, Ken	/			\$25.00
	•••••	Contributor address; City; State; Zip Code				+ -
		CUltimbutor address, City, State, Zip Code				
		ROSEVILLE, CA 95661				
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Senior Finar		Bank of America	0,		
-						
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The Instru	uction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 19/108 Rpt: 22/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
08/31/2024	Crawford, Ken		\$25.0
	6 Contributor address; City; State; Zip Code		1
	ROSEVILLE, CA 95661		
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Senior Fina	ncial Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/15/2024	Crawford, Ken		\$25.0
			4
	ROSEVILLE, CA 95661		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	δ)
Senior Fina	ncial Advisor	Bank of America	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
09/30/2024			\$25.0
	Contributor address; City; State; Zip Code		•
	ROSEVILLE, CA 95661		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Senior Fina	ncial Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/15/2024			\$25.0
	Contributor address; City; State; Zip Code		•
	ROSEVILLE, CA 95661		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	š)
Senior Fina	ncial Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/15/2024			\$25.0
	Contributor address; City; State; Zip Code		1
	NEW YORK, NY 10036		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Investment	Banker VI	Bank of America	
		1	

The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/108 Rpt: 23/122	
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
	erica State and Federal PAC			00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
07/31/2024	Cuenca, Ricardo				\$25.00
	6 Contributor address; City; State; Zip Code		1		
	NEW YORK, NY 10036				
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>.</u> s)		
Investment B	anker VI	Bank of America			
Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
08/15/2024	Cuenca, Ricardo				\$25.00
	Contributor address; City; State; Zip Code		·		T -
	NEW YORK, NY 10036				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Investment B		Bank of America	-,		
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>)	Τ	Amount of Contribution (\$)	
08/31/2024	Cuenca, Ricardo	/		Allount of Contribution (\$)	\$25.00
00/01/2027					Ψ20.00
	Contributor address; City; State; Zip Code				
	NEW YORK, NY 10036				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	⊥ s)		
Investment B		Bank of America	,		
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>)	Τ	Amount of Contribution (\$)	
09/15/2024	Cuenca, Ricardo	/		Allount of Contribution (*)	\$25.00
00/10/2021					Ψ20.00
	Contributor address; City; State; Zip Code				
	NEW YORK, NY 10036				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Investment B		Bank of America			
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>)	Τ	Amount of Contribution (\$)	
07/15/2024	Didovic, Michael	/			\$20.00
••••	Contributor address; City; State; Zip Code				T-
	Culturbulor address, City, State, Zip Code				
	NEW YORK, NY 10036				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u>ال</u>		
	Executive MKTS	Bank of America	5)		
i iogramme.		Damenta			

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 21/108 Rpt: 24/122
2 FILER NAME Bank of Ame	erica State and Federal PAC		3 Filer ID (Ethics Commission Filers) 00080283
4 Date 07/31/2024	07/31/2024 Didovic, Michael		7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code		
	NEW YORK, NY 10036		
	pation / Job title (See Instructions) Executive MKTS	9 Employer (See Instructions) Bank of America	·)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024	Didovic, Michael Contributor address; City; State; Zip Code		\$20.00
D in single and	NEW YORK, NY 10036		、 、
	pation / Job title (See Instructions) Executive MKTS	Employer (See Instructions) Bank of America	;)
			Amount of Contribution (\$)
Date 08/31/2024	Didovic, Michael)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code NEW YORK, NY 10036		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> ;)
	Executive MKTS	Bank of America	, ,
Date 09/15/2024	Full name of contributor out-of-state PAC (ID#:_ Didovic, Michael		Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code		
	NEW YORK, NY 10036		
	pation / Job title (See Instructions) Executive MKTS	Employer (See Instructions) Bank of America	;)
Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Didovic, Michael Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$20.00
Principal occur	NEW YORK, NY 10036 pation / Job title (See Instructions)	Employer (See Instructions)	
	Executive MKTS	Bank of America)
		1	

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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 22/108 Rpt: 25/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
10/15/2024	Didovic, Michael		\$20.0
	6 Contributor address; City; State; Zip Code		1
	NEW YORK, NY 10036		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
Programmer	r Executive MKTS	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:	· ·)	Amount of Contribution (\$)
07/15/2024	Ergungor, Ozgur		\$34.5
	Contributor address; City; State; Zip Code		•
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Sr Quantitati	ive Fin Analyst	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024	Ergungor, Ozgur		\$34.5
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Sr Quantitati	ive Fin Analyst	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024	Ergungor, Ozgur		\$34.5
	Contributor address; City; State; Zip Code		1
	CHARLOTTE, NC 28255		
·	upation / Job title (See Instructions)	Employer (See Instructions	3)
Sr Quantitati	ive Fin Analyst	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/31/2024	Ergungor, Ozgur		\$34.5
	Contributor address; City; State; Zip Code		1
	CHARLOTTE, NC 28255		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Sr Quantitati	ive Fin Analyst	Bank of America	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 23/108 Rpt: 26/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
09/15/2024	Ergungor, Ozgur		\$34.5
	6 Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
-	upation / Job title (See Instructions)	9 Employer (See Instructions))
Sr Quantitat	tive Fin Analyst	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024	Ergungor, Ozgur		\$34.5
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Sr Quantitat	tive Fin Analyst	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024	Ergungor, Ozgur		\$34.5
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Sr Quantitat	tive Fin Analyst	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024	Fleischer, Michael		\$24.0
	Contributor address; City; State; Zip Code		
	ADDISON, TX 75001		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Sr Lead Cns	slt - Tech App Engin	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/31/2024	Fleischer, Michael		\$24.0
	Contributor address; City; State; Zip Code		
	ADDISON, TX 75001		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Sr Lead Cns	slt - Tech App Engin	Bank of America	
		1	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 24/108 Rpt: 27/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	5)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/15/2024	Fleischer, Michael		\$24	4.00
	6 Contributor address; City; State; Zip Code			
	ADDISON, TX 75001			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Sr Lead Cns	slt - Tech App Engin	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/31/2024	Fleischer, Michael			4.00
	ADDISON, TX 75001			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Sr Lead Cns	slt - Tech App Engin	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/15/2024	Fleischer, Michael			4.00
	Contributor address; City; State; Zip Code			
	ADDISON, TX 75001			
	upation / Job title (See Instructions)	Employer (See Instructions	<i></i>	
Sr Lead Cns	slt - Tech App Engin	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024	Fleischer, Michael		\$24	4.00
	Contributor address; City; State; Zip Code			
	ADDISON, TX 75001			
	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Sr Lead Cns	slt - Tech App Engin	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/15/2024	Fleischer, Michael		\$24	4.00
	Contributor address; City; State; Zip Code			
	ADDISON, TX 75001	-		
	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Sr Lead Cns	slt - Tech App Engin	Bank of America		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 25/108 Rpt: 28/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/15/2024 Foard, John	\$20.00
6 Contributor address; City; State; Zip Code	
COLUMBIA, MD 21044	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction	ons)
Senior Financial Advisor Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024 Foard, John	\$20.00
Contributor address; City; State; Zip Code	
COLUMBIA, MD 21044	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Senior Financial Advisor Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024 Foard, John	\$20.00
Contributor address; City; State; Zip Code	
COLUMBIA, MD 21044	
Principal occupation / Job title (See Instructions) Employer (See Instruction	
Senior Financial Advisor Bank of America	(2113)
	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) 08/31/2024 Foard, John	\$20.00
Contributor address; City; State; Zip Code	
Continuator address, City, State, Zip Code	
COLUMBIA, MD 21044	
COLUMBIA, MD 21044 Principal occupation / Job title (See Instructions) Employer (See Instruction	
	ons)
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction Bank of America) Senior Financial Advisor Bank of America Date Full name of contributor out-of-state PAC (ID#:) 09/15/2024 Foard, John	-
Principal occupation / Job title (See Instructions) Employer (See Instruction Bank of America) Senior Financial Advisor Bank of America Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction Bank of America Senior Financial Advisor Bank of America Date Full name of contributor out-of-state PAC (ID#:) 09/15/2024 Foard, John	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction Bank of America Senior Financial Advisor Bank of America Date Full name of contributor out-of-state PAC (ID#:) 09/15/2024 Foard, John	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction Bank of America) Senior Financial Advisor Bank of America Date Full name of contributor out-of-state PAC (ID#:) 09/15/2024 Foard, John	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction Bank of America Senior Financial Advisor Bank of America Date Full name of contributor out-of-state PAC (ID#:) 09/15/2024 Foard, John Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$20.00

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 26/108 Rpt: 29/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/30/2024	Foard, John		\$20	20.00
	6 Contributor address; City; State; Zip Code			
	COLUMBIA, MD 21044			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Senior Finar	ncial Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Foard, John		\$20	20.00
	Contributor address; City; State; Zip Code			
	COLUMBIA, MD 21044			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Senior Finar	ncial Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/15/2024	Funderburk, Marc			25.00
	Contributor address; City; State; Zip Code		•	
	ADDISON, TX 75001			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;) ;)	
Sr Tech Mgr	r - Bus Tech Anly	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	Funderburk, Marc		\$2!	25.00
	Contributor address; City; State; Zip Code		1	
	ADDISON, TX 75001			
-	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Sr Tech Mgr	r - Bus Tech Anly	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/2024	Funderburk, Marc		\$2!	25.00
	Contributor address; City; State; Zip Code		1	
	ADDISON, TX 75001	-		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Sr Tech Mgr	r - Bus Tech Anly	Bank of America		

The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 27/108 Rpt: 30/122	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
Bank of Am	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)	
08/31/2024	· ·			\$25.00
	6 Contributor address; City; State; Zip Code			
	ADDISON, TX 75001			
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions))	
•	r - Bus Tech Anly	Bank of America	, ,	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
09/15/2024		·		\$25.00
	ADDISON, TX 75001			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Tech Mg	r - Bus Tech Anly	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
09/30/2024	· ·			\$25.00
	Contributor address; City; State; Zip Code			
	ADDISON, TX 75001		-	
•	upation / Job title (See Instructions)	Employer (See Instructions))	
_	r - Bus Tech Anly	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
10/15/2024	·			\$25.00
	Contributor address; City; State; Zip Code			
	ADDISON, TX 75001			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
	r - Bus Tech Anly	Bank of America)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
07/15/2024		·/		\$25.00
01110,202.	Contributor address; City; State; Zip Code			Ψ20.00
	Continuation address, City, State, Zip Code			
	CHARLOTTE, NC 28255			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
Business C		Bank of America		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 28/108 Rpt: 31/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
07/31/2024 Gandee, Debora	\$25.00
6 Contributor address; City; State; Zip Code	
CHARLOTTE, NC 28255	
8 Principal occupation / Job title (See Instructions) 9 Employer (Se	ee Instructions)
Business Control Exec Bank of Ame	erica
Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)
08/15/2024 Gandee, Debora	\$25.00
Contributor address; City; State; Zip Code	
CHARLOTTE, NC 28255	
Principal occupation / Job title (See Instructions) Employer (Se	ee Instructions)
Business Control Exec Bank of Ame	erica
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
08/31/2024 Gandee, Debora	\$25.00
Contributor address; City; State; Zip Code	
CHARLOTTE, NC 28255	
Principal occupation / Job title (See Instructions) Employer (Se Business Control Exec Bank of Ame	ee Instructions)
Business Control Exec Bark of Ann	
Date Full name of contributor out-of-state PAC (ID#:	
09/15/2024 Gandee, Debora	\$25.00
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255	\$25.00
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255	\$25.00 ee Instructions)
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Business Control Exec Bank of Ame	\$25.00 \$25.00 ee Instructions) erica
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Business Control Exec Bank of Ame	\$25.00 ee Instructions)
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Business Control Exec Date Full name of contributor out-of-state PAC (ID#:	erica Amount of Contribution (\$) \$25.00
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Business Control Exec Date Full name of contributor 09/30/2024 Gandee, Debora	erica Amount of Contribution (\$) \$25.00
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Business Control Exec Date Full name of contributor 09/30/2024 Gandee, Debora	erica Amount of Contribution (\$) \$25.00
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Business Control Exec Date Full name of contributor 09/30/2024 Gandee, Debora	erica Amount of Contribution (\$) \$25.00
09/15/2024 Gandee, Debora Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Business Control Exec Date Full name of contributor 09/30/2024 Gandee, Debora Contributor address; City; State; Zip Code CharLoTTE, NC 28255	erica Amount of Contribution (\$) \$25.00

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 29/108 Rpt: 32/122	
2 FILER NAME			3 Filer ID (Ethics Commission F	ilers)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
10/15/2024	Gandee, Debora			\$25.00
	6 Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Business Co		Bank of America)	
Date			Amount of Contribution (\$)	
07/15/2024	Full name of contributor out-of-state PAC (ID#: Garza-Hachey, Irene)	Amount of Contribution (\$)	\$20.00
01113/2024				φ20.00
	Contributor address; City; State; Zip Code			
	AUBURN HILLS, MI 48326			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions))	
Leasing Crea		Bank of America	,	
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
07/31/2024	Garza-Hachey, Irene	/		\$20.00
01/02/2021	Contributor address; City; State; Zip Code			+20100
	AUBURN HILLS, MI 48326			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Leasing Crea	dit Mgr	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/2024	Garza-Hachey, Irene			\$20.00
	Contributor address; City; State; Zip Code			
	AUBURN HILLS, MI 48326			
	pation / Job title (See Instructions)	Employer (See Instructions))	
Leasing Crea	dit Mgr	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Garza-Hachey, Irene			\$20.00
	Contributor address; City; State; Zip Code			
	AUBURN HILLS, MI 48326			
	pation / Job title (See Instructions)	Employer (See Instructions))	
Leasing Cree	dit Mgr	Bank of America		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 30/108 Rpt: 33/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/15/2024	Garza-Hachey, Irene		\$20.00
	6 Contributor address; City; State; Zip Code		
	AUBURN HILLS, MI 48326		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Leasing Cre	dit Mgr	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024	Garza-Hachey, Irene	/	\$20.00
	Contributor address, City, State, Zip Code		
	AUBURN HILLS, MI 48326		
Dringinglago	·	Employer (Cap Instructions	<u></u>
Leasing Cre	ipation / Job title (See Instructions)	Employer (See Instructions Bank of America	5)
		Balik Ul America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/15/2024	Garza-Hachey, Irene		\$20.00
	Contributor address; City; State; Zip Code		
	AUBURN HILLS, MI 48326		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
Leasing Cre	dit Mgr	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/15/2024	Geist, Suzanne	/	\$16.00
01/20/2021	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	NEWARK, DE 19713		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
	ns Project Manager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024	Geist, Suzanne		\$16.00
	Contributor address; City; State; Zip Code		
	NEWARK, DE 19713		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)
Sr Operation	ns Project Manager	Bank of America	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 31/108 Rpt: 34/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/15/2024	Geist, Suzanne		\$1	16.00
	6 Contributor address; City; State; Zip Code			
	NEWARK, DE 19713			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Sr Operation	ns Project Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/31/2024	Geist, Suzanne	/		16.00
00,01,202				10.00
	Continuutor address, City, State, Zip Code			
	NEWARK, DE 19713			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	١	
	ns Project Manager	Bank of America)	
Date)	Amount of Contribution (\$)	
09/15/2024	Geist, Suzanne		\$1	16.00
	Contributor address; City; State; Zip Code			
	NEWARK, DE 19713			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Operation	ns Project Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024	Geist, Suzanne			16.00
	Contributor address; City; State; Zip Code			
	NEWARK, DE 19713			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
	ns Project Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
10/15/2024	Geist, Suzanne	/		16.00
	·		Ψ-	10.00
	Contributor address; City; State; Zip Code			
	NEWARK, DE 19713			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Operation	ns Project Manager	Bank of America		
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The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 32/108 Rpt: 35/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/15/2024	Gibby, Zoe		\$35.00
	6 Contributor address; City; State; Zip Code		1
	PLANO, TX 75024		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Sr Service D	Delivery Manager	Bank of America	
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/31/2024	Gibby, Zoe		\$35.00
	Contributor address; City; State; Zip Code		•
	PLANO, TX 75024		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ls)
-	Delivery Manager	Bank of America	-,
Date			Amount of Contribution (\$)
Dale 08/15/2024	Full name of contributor out-of-state PAC (ID#: Gibby, Zoe)	Amount of Contribution (\$) \$35.00
00/15/2024	-		φυυ.υ.
	Contributor address; City; State; Zip Code		
	PLANO, TX 75024		
Bringinal occu	upation / Job title (See Instructions)	Employer (See Instructions	~
	pation / Job little (See Instructions) Delivery Manager	Employer (See Instructions Bank of America	5)
			1
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/31/2024	Gibby, Zoe		\$35.00
	Contributor address; City; State; Zip Code		
Dringing occu	PLANO, TX 75024	Employer (See Instructions	-\
-	ipation / Job title (See Instructions) Delivery Manager	Employer (See Instructions Bank of America	5)
			T
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024	Gibby, Zoe		\$35.00
	Contributor address; City; State; Zip Code		
	PLANO, TX 75024	-	
-	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Sr Service D	Delivery Manager	Bank of America	

Bank of America State and Federal PAC 00080283					
Bank of America State and Federal PAC 00080283 4 Date 5 Full name of contributor nut-of-state PAC (DU:	The Instruc	ction Guide explains how to complete this f	form.		
Bank of America State and Federal PAC 00080283 4 Date 09/30/2024 5 Full name of contributor (alby, Zoe PLANO, TX 75024 7 Amount of Contribution (\$) 5 Contributor address; City, State; Zip Code 7 Amount of Contribution (\$) 5 Sr Service Delivery Manager 9 Employer (See Instructions) Sr Service Delivery Manager 9 Employer (See Instructions) Bank of America Date 10/15/2024 Full name of contributor contributor address; City, State; Zip Code Amount of Contribution (\$) 5 Sr Service Delivery Manager Amount of Contribution (\$) 5 Sr Service Delivery Manager Date 07/15/2024 Full name of contributor contributor address; City, State; Zip Code Amount of Contribution (\$) 5 Sr Service Delivery Manager Samount of Contribution (\$) 5 Sr Service Delivery Manager Date 07/15/2024 Full name of contributor contributor address; City, State; Zip Code Amount of Contribution (\$) 5 St Service Delivery Manager Samount of Contribution (\$) 5 St Service Delivery Manager Date 07/15/2024 Full name of contributor contributor address; City, State; Zip Code Amount of Contribution (\$) 5 St Service Delivery Manager Samount of Contribution (\$) 5 St Service Delivery Manager Principal occupation / Job tite (See Instructions) Product Mingr Employer (See Instructions) Bank of America Amount of Contribution (\$) 5 St Service Manager Date 06/15/2024 Full name of contributor NEWARK, DE 19713 Imployer (See Instructions) Bank of America Amount of Contribution	2 FILER NAME				ers)
09/30/2024 Gibby, Zoe \$35.00 Plancipal occupation / Job tills (See Instructions) Sr Service Delivery Manager Date Dollar of Contributor address; City; State; Zip Code Plancipal occupation / Job tills (See Instructions) Sr Service Delivery Manager Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (Der		erica State and Federal PAC			
6 Contributor address; City; State; Zip Code PLANO, TX 75024 PLANO, TX 75024 3 Principal occupation / Job tite (See Instructions) S Envice Delivery Manager Date Full name of contributor out-of-state PAC (DD:	4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
6 Contributor address; City; State; Zip Code 7 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager 9 Date Full name of contributor out-of-state PAC (D#	09/30/2024			5	\$35.00
3 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager 9 Employer (See Instructions) Bank of America Date 10/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$35.00 Date 10/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$35.00 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager Employer (See Instructions) Bank of America Date 07/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 07/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America \$30.00 Date 07/31/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Or/31/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America \$30.00 Date 08/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00					
3 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager 9 Employer (See Instructions) Bank of America Date 10/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$35.00 Date 10/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$35.00 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager Employer (See Instructions) Bank of America Date 07/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 07/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America \$30.00 Date 07/31/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Or/31/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America \$30.00 Date 08/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00					
3 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager 9 Employer (See Instructions) Bank of America Date 10/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$35.00 Date 10/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$35.00 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager Employer (See Instructions) Bank of America Date 07/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 07/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America \$30.00 Date 07/31/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Or/31/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America \$30.00 Date 08/15/2024 Full name of contributor out-of-state PAC (Diff:) Amount of Contribution (\$) \$30.00		PLANO, TX 75024			
Sr Service Delivery Manager Bank of America Date 10/15/2024 Full name of contributor out-of-state PAC (ID# Contributor address: City, State; Zip Code Amount of Contribution (\$) \$35.00 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager Employer (See Instructions) Bank of America Date 07/15/2024 Full name of contributor out-of-state PAC (ID# Contributor address; City, State; Zip Code Amount of Contribution (\$) S30.00 Principal occupation / Job title (See Instructions) Product Mngr Full name of contributor out-of-state PAC (ID# Contributor address; City, State; Zip Code Amount of Contribution (\$) S30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America \$30.00 Date 07/31/2024 Full name of contributor out-of-state PAC (ID# Contributor address; City, State; Zip Code Amount of Contribution (\$) S30.00 \$30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America Amount of Contribution (\$) S30.00 \$30.00 Principal occupation / Job title (See Instructions) Product Mngr Employer (See Instructions) Bank of America \$30.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bank of America \$30.00 Date 08/15/2024 Full name of contributor Contributor address; City, State; Zip Code	8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
10/15/2024 Gibby, Zoe \$35.00 Contributor address; City, State; Zip Code PLANO, TX 75024 Principal occupation / Job title (See Instructions) Employer (See Instructions) S7 Service Delivery Manager Bank of America Date Full name of contributor out-of-state PAC (IDE:				,	
10/15/2024 Gibby, Zoe \$35.00 Contributor address; City, State; Zip Code PLANO, TX 75024 Principal occupation / Job title (See Instructions) Employer (See Instructions) S7 Service Delivery Manager Bank of America Date Full name of contributor out-of-state PAC (IDE:	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
Contributor address; City, State; Zip Code PLANO, TX 75024 Principal occupation / Job title (See Instructions) Sr Service Delivery Manager Date 07/15/2024 Greto, Pamela Contributor address; City, State; Zip Code NEWARK, DE 19713 Principal occupation / Job title (See Instructions) Bank of America Date 08/15/2024			/		\$35.00
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The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 34/108 Rpt: 37/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date)#:)	7 Amount of Contribution (\$)
08/31/2024	Greto, Pamela		\$30.00
	6 Contributor address; City; State; Zip Code		1
	NEWARK, DE 19713		
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09/15/2024	Greto, Pamela		\$30.00
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09/30/2024	Greto, Pamela		\$30.00
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	NEWARK, DE 19713		
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10/15/2024	Greto, Pamela		\$30.00
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07/15/2024	Grip, Brian		\$19.00
	Contributor address; City; State; Zip Code		1
	MANCHESTER, NH 03101		
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6 Contributor address; City; State; Zip Code MANCHESTER, NH 03101 9 Employer (See Instructore) Bank of America Date Full name of contributor				
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Contributor address; City; State; Zip Code MANCHESTER, NH 03101 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$19.0 09/15/2024 Grip, Brian Contributor address; City; State; Zip Code Amount of Contribution (\$) \$19.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$19.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$19.0 Public Policy Xee Instructions) Employer (See Instructions) Amount of Contribution (\$) \$19.0 Public Policy Vector Instructions) Employer (See Instructions) Amount of Contribution (\$) \$22.0 Date Full name of contributor	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
Contributor address; City; State; Zip Code MANCHESTER, NH 03101 Principal occupation / Job title (See Instructions) Employer (See Instructions) Public Policy Executive I Bank of America Date Full name of contributor out-of-state PAC (ID#;) Amount of Contribution (\$) 09/15/2024 Grip, Brian Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$19.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$19.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$19.0 Public Policy Executive I Bank of America \$20.0 Date Full name of contributor out-of-state PAC (ID#;) Amount of Contribution (\$) 09/30/2024 Full name of contributor out-of-state PAC (ID#;) Amount of Contribution (\$) 09/30/2024 Full name of contributor code Amount of Contribution (\$) 09/30/2024 Full name of contributor	08/31/2024			\$19.0
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Public Policy Executive I Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/15/2024 Grip, Brian \$19.0 Contributor address; City; State; Zip Code Amount of Contribution (\$) MANCHESTER, NH 03101 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Public Policy Executive I Bank of America Date Full name of contributor out-of-state PAC (ID#:) 09/30/2024 Grip, Brian Contributor address; City; State; Zip Code Amount of Contribution (\$) MANCHESTER, NH 03101 Amount of Contribution (\$)		MANICHESTED NH 02101		
Public Policy Executive I Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/15/2024 Grip, Brian \$19.0 Contributor address; City; State; Zip Code MANCHESTER, NH 03101 \$19.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Performation Public Policy Executive I Bank of America Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Grip, Brian Amount of Contribution (\$) \$22.0 Ogrip, Brian Contributor address; City; State; Zip Code Amount of Contribution (\$) \$22.0 MANCHESTER, NH 03101 MANCHESTER, NH 03101 Amount of Contribution (\$) \$22.0	Drincinal occu		Employor (See Instructions	
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09/15/2024 Grip, Brian \$19.0 Contributor address; City; State; Zip Code \$19.0 MANCHESTER, NH 03101 MANCHESTER, NH 03101 Principal occuztion / Job title (See Instructions) Employer (See Instructions) Public Policy Executive I Bank of America Date Full name of contributor	-	-		Amount of Contribution (\$)
Contributor address; City; State; Zip Code MANCHESTER, NH 03101 Principal occupation / Job title (See Instructions) Public Policy Executive I Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$) \$22.0 MANCHESTER, NH 03101)	
MANCHESTER, NH 03101 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Public Policy Executive I Bank of America Date Full name of contributor out-of-state PAC (ID#:) 09/30/2024 Grip, Brian Contributor address; City; State; Zip Code Amount of Contribution (\$) MANCHESTER, NH 03101 Image: Contribute of Contribute	03/13/2024			ψ19.0
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Public Policy Executive I Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Grip, Brian \$22.0 Contributor address; City; State; Zip Code MANCHESTER, NH 03101				
Public Policy Executive I Bank of America Date Full name of contributor out-of-state PAC (ID#:) 09/30/2024 Grip, Brian Amount of Contribution (\$) Contributor address; City; State; Zip Code MANCHESTER, NH 03101		MANCHESTER, NH 03101		
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Grip, Brian \$22.0 Contributor address; City; State; Zip Code MANCHESTER, NH 03101	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L
09/30/2024 Grip, Brian \$22.0 Contributor address; City; State; Zip Code MANCHESTER, NH 03101	Public Policy	y Executive I	Bank of America	
09/30/2024 Grip, Brian \$22.0 Contributor address; City; State; Zip Code MANCHESTER, NH 03101	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Contributor address; City; State; Zip Code MANCHESTER, NH 03101	09/30/2024			\$22.0
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
			Employer (See Instructions	5)
Public Policy Executive I Bank of America	Public Policy	y Executive I	Bank of America	

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 36/108 Rpt: 39/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
Bank of Ame	erica State and Federal PAC		00080283	-
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
10/15/2024	Grip, Brian		\$2	22.00
	6 Contributor address; City; State; Zip Code			
	MANCHESTER, NH 03101			
-	pation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Public Policy	Executive I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
07/15/2024	Guth, David		\$2	20.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Portfolio Mar	nager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	Guth, David		\$2	20.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
	pation / Job title (See Instructions)	Employer (See Instructions)	
Portfolio Mar	1ager	Bank of America		
Date)	Amount of Contribution (\$)	
08/15/2024	Guth, David		\$2	20.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Portfolio Mar		Bank of America)	
			Amount of Contribution (#)	
Date 08/31/2024	Full name of contributor out-of-state PAC (ID#: Guth, David)	Amount of Contribution (\$)	20.00
00/31/2024			Ψζ	20.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Portfolio Mar		Bank of America)	

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 37/108 Rpt: 40/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
09/15/2024	Guth, David		\$20.
	6 Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
	upation / Job title (See Instructions)	9 Employer (See Instructions	
Portfolio Ma	nager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/30/2024	Guth, David		\$20.
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
•	upation / Job title (See Instructions)	Employer (See Instructions	
Portfolio Ma	nager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024	Guth, David		\$20.
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255	1	<u> </u>
	upation / Job title (See Instructions)	Employer (See Instructions	<i>i</i>)
Portfolio Ma	-	Bank of America	
Date)	Amount of Contribution (\$)
07/15/2024	Hammond, Charles		\$16.
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)
	ce Business Support	Bank of America	,
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)
07/31/2024	Hammond, Charles	/	\$16.
••••	Contributor address; City; State: Zip Code		
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	۲ ۵)
Mgr - Financ	ce Business Support	Bank of America	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 38/108 Rpt: 41/122
2 FILER NAME Bank of Ame	erica State and Federal PAC		3 Filer ID (Ethics Commission Filers) 00080283
4 Date 08/15/2024	 5 Full name of contributor out-of-state PAC (ID#: Hammond, Charles 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$16.00
	CHARLOTTE, NC 28255		
	pation / Job title (See Instructions) e Business Support	9 Employer (See Instructions Bank of America	s)
Date 08/31/2024	Full name of contributor out-of-state PAC (ID#: Hammond, Charles Contributor address; City; State; Zip Code CHARLOTTE, NC 28255)	Amount of Contribution (\$) \$16.00
	pation / Job title (See Instructions)	Employer (See Instructions	 ;)
_	e Business Support	Bank of America	Assessment of Questributions (d)
Date 09/15/2024	Full name of contributor out-of-state PAC (ID#:_ Hammond, Charles Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$16.00
	CHARLOTTE, NC 28255		
	pation / Job title (See Instructions) e Business Support	Employer (See Instructions Bank of America	5)
Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Hammond, Charles Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$16.00
Principal occu	CHARLOTTE, NC 28255 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Mgr - Financ	e Business Support	Bank of America	
Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Hammond, Charles Contributor address; City; State; Zip Code CHARLOTTE, NC 28255)	Amount of Contribution (\$) \$16.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
-	e Business Support	Bank of America	

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 39/108 Rpt: 42/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/15/2024	Hanson, Alan		\$25.0
	6 Contributor address; City; State; Zip Code		
	NEW YORK, NY 10036		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)
Bus Strat & I	Initiative Exec I	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/31/2024	Hanson, Alan		\$25.0
	NEW YORK, NY 10036		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)
Bus Strat & I	Initiative Exec I	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/15/2024	Hanson, Alan		\$25.0
	Contributor address; City; State; Zip Code		
	NEW YORK, NY 10036		
	ipation / Job title (See Instructions)	Employer (See Instructions	;)
Bus Strat & I	Initiative Exec I	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024	Hanson, Alan		\$25.0
	Contributor address; City; State; Zip Code		
	NEW YORK, NY 10036		
	upation / Job title (See Instructions)	Employer (See Instructions	;)
Bus Strat & I	Initiative Exec I	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024	Hanson, Alan		\$25.0
	Contributor address; City; State; Zip Code		
	NEW YORK, NY 10036		
-	ipation / Job title (See Instructions)	Employer (See Instructions	;)
Bus Strat & I	Initiative Exec I	Bank of America	

The Instru	uction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 40/108 Rpt: 43/122	
2 FILER NAMI			3 Filer ID (Ethics Commission Filer	rs)
	nerica State and Federal PAC		00080283	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/30/2024			\$2	25.00
	6 Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions)	
Bus Strat &	Initiative Exec I	Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024				25.00
	NEW YORK, NY 10036			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
	Initiative Exec I	Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/15/2024				50.00
01110/2024			\$	50.00
	Contributor address; City; State; Zip Code			
	DELRAY BEACH, FL 33483			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
-	nagement Advisor	Bank of America		
Date	-)	Amount of Contribution (\$)	
07/31/2024)		50.00
01101/2024			Ψ.	50.00
	Contributor address; City; State; Zip Code			
	DELRAY BEACH, FL 33483			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
-	nagement Advisor	Bank of America	,	
Date			Amount of Contribution (\$)	
08/15/2024)		50.00
00/13/2024			Ψ.	50.00
	Contributor address; City; State; Zip Code			
	DELRAY BEACH, FL 33483			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
-	nagement Advisor	Bank of America)	
	agement Auvisor			

The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 41/108 Rpt: 44/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/31/2024	Henderson, Walker		\$50.0
	6 Contributor address; City; State; Zip Code		
	DELRAY BEACH, FL 33483		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Wealth Mana	agement Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024	Henderson, Walker		\$50.0
	Contributor address; City; State; Zip Code		
	DELRAY BEACH, FL 33483		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
Wealth Mana	agement Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024	Henderson, Walker		\$50.0
	Contributor address; City; State; Zip Code		
	DELRAY BEACH, FL 33483		
	pation / Job title (See Instructions)	Employer (See Instructions	
Wealth Mana	agement Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024	Henderson, Walker		\$50.0
	Contributor address; City; State; Zip Code		
Dringinglassy	DELRAY BEACH, FL 33483		
	pation / Job title (See Instructions)	Employer (See Instructions Bank of America	5)
	agement Advisor		1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024	Houser, Rembert		\$50.0
	Contributor address; City; State; Zip Code		
Dringinglassy	COLUMBUS, GA 31909		
	pation / Job title (See Instructions)	Employer (See Instructions	5)
Senior Finan	UIAI AUVISUI	Bank of America	

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 42/108 Rpt: 45/122	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		erica State and Federal PAC			00080283	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	08/15/2024	Houser, Rembert				\$100.00
		6 Contributor address; City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1		
		COLUMBUS, GA 31909				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	Senior Finan	icial Advisor	Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/15/2024	Houser, Rembert				\$100.00
				ł		
		COLUMBUS, GA 31909				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Senior Finan		Bank of America	-		
╞	Date	Full name of contributor Out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	10/15/2024	Houser, Rembert	/			\$100.00
	10,10,2.	Contributor address; City; State; Zip Code		-		#±00
		כטוונווטענטו מעערבסס, כונץ, סומנכ, בוף כסעכ				
		COLUMBUS, GA 31909				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	⊥ s)		
	Senior Finan		Bank of America	-,		
⊨	Date)		Amount of Contribution (\$)	
	07/15/2024	Jamison, Wendy	/			\$45.00
	0111312024	-				Φ40.00
		Contributor address; City; State; Zip Code				
		WILMINGTON, DE 19884				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L s)		
		ipport Manager II	Bank of America	-,		
╞	Date			—	Amount of Contribution (\$)	
	07/31/2024	Full name of contributor out-of-state PAC (ID#:] Jamison, Wendy)			\$45.00
	0113112024	-				Φ40.00
		Contributor address; City; State; Zip Code				
		WILMINGTON, DE 19884				
┡	Dringingloog		Employer (See Instructions			
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
L	Business Su	ipport Manager II	Bank of America			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 43/108 Rpt: 46/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/15/2024	Jamison, Wendy		\$4	5.00
	6 Contributor address; City; State; Zip Code			
	WILMINGTON, DE 19884			
	pation / Job title (See Instructions)	 9 Employer (See Instructions Bank of America 		
Business Su	Ipport Manager II	Bank of America		
Date)	Amount of Contribution (\$)	
08/31/2024			\$4	5.00
	Contributor address; City; State; Zip Code			
	WILMINGTON, DE 19884		<u></u>	
	pation / Job title (See Instructions)	Employer (See Instructions Bank of America		
Busiliess Su	Ipport Manager II	Barik Ul America		
Date)	Amount of Contribution (\$)	
09/15/2024	Jamison, Wendy		\$4	5.00
	Contributor address; City; State; Zip Code			
	WILMINGTON, DE 19884			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
•	ipport Manager II	Bank of America	, ,	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024	Jamison, Wendy			5.00
	Contributor address; City; State; Zip Code			
	WILMINGTON, DE 19884			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Business Su	ipport Manager II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/15/2024	Jamison, Wendy		\$4	5.00
	Contributor address; City; State; Zip Code			
	WILMINGTON, DE 19884			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Business Su	ipport Manager II	Bank of America		

The Instruction Guide explains how to complete this form. Image: State and Federal PAC Image: State and Federal PAC	Total pages Schedule A1: Sch: 44/108 Rpt: 47/122
Bank of America State and Federal PAC	2 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	00080283
	7 Amount of Contribution (\$)
07/15/2024 Johnson, Shemeka	\$25.00
6 Contributor address; City; State; Zip Code	1
CHARLOTTE, NC 28255	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions	s)
Program Manager Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024 Johnson, Shemeka	\$25.00
Contributor address; City; State; Zip Code	•
CHARLOTTE, NC 28255	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Program Manager Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024 Johnson, Shemeka	\$25.00
Contributor address; City; State; Zip Code	
CHARLOTTE, NC 28255	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Program Manager Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024 Johnson, Shemeka	\$25.00
Contributor address; City; State; Zip Code	1
CHARLOTTE, NC 28255	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Program Manager Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024 Johnson, Shemeka	\$25.00
	•
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	s)
Contributor address; City; State; Zip Code CHARLOTTE, NC 28255	s)

The Instr	ruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 45/108 Rpt: 48/122	
2 FILER NAM	 /E		3 Filer ID (Ethics Commission File	ers)
	merica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/30/2024	4 Johnson, Shemeka		\$	\$25.00
	6 Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
	cupation / Job title (See Instructions)	9 Employer (See Instructions	·)	
Program N	lanager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/15/2024			\$	\$25.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	()	
Program N	lanager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)	
07/15/2024	· · ·		\$	\$80.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
-	cupation / Job title (See Instructions)	Employer (See Instructions	;)	
Sr Busines	ss Exec - Tech	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	4 Keenan, Edward		\$	\$80.00
	Contributor address; City; State; Zip Code			
Drippingling	NEW YORK, NY 10036			
	cupation / Job title (See Instructions) ss Exec - Tech	Employer (See Instructions Bank of America	.)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	+00.00
08/15/2024	· · · · · · · · · · · · · · · · · · ·		\$	\$80.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
-	ss Exec - Tech	Bank of America)	
		Dank Or America		

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 46/108 Rpt: 49/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/31/2024	Keenan, Edward		\$8	80.00
	6 Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Sr Business	s Exec - Tech	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024			\$8	80.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Business	s Exec - Tech	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/30/2024	Keenan, Edward		\$8	80.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036		-	
	upation / Job title (See Instructions)	Employer (See Instructions))	
Sf Business	Exec - Tech	Bank of America		
Date)	Amount of Contribution (\$)	
10/15/2024	Keenan, Edward		\$8	80.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions))	
-	s Exec - Tech	Bank of America	,	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
07/15/2024				25.00
•••===	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions))	
Bus Strat &		Bank of America		
Bus Strat &	Init Mgr	Bank of America		

т	he Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 47/108 Rpt: 50/122
2 FI	ILER NAME			3 Filer ID (Ethics Commission Filers)
		erica State and Federal PAC		00080283
4 D	ate	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
0	7/31/2024	Kennedy, Alan		\$25.00
		6 Contributor address; City; State; Zip Code		1
		NEW YORK, NY 10036		
8 Pi	rincipal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)
В	us Strat & I	init Mgr	Bank of America	
D	ate	Full name of contributor out-of-state PAC (ID#:	•	Amount of Contribution (\$)
08	8/15/2024	Kennedy, Alan		\$25.00
		Contributor address; City; State; Zip Code		1
		NEW YORK, NY 10036		
Pi	rincipal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
В	us Strat & I	init Mgr	Bank of America	
D	ate	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	8/31/2024	Kennedy, Alan		\$25.00
		Contributor address; City; State; Zip Code		4
		NEW YORK, NY 10036		
Pi	rincipal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)
	us Strat & I		Bank of America	
	ate	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	9/15/2024	Kennedy, Alan	/	\$25.00
-	5/10/202	Contributor address; City; State; Zip Code		· · · · · ·
		Continution address, City, State, Zip Code		
		NEW YORK, NY 10036		
PI	rincipal occu	I pation / Job title (See Instructions)	Employer (See Instructions	1s)
	us Strat & I		Bank of America	
	ate	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
	9/30/2024	Kennedy, Alan	/	\$25.00
	51001202.	Contributor address; City; State; Zip Code		
		Continuutor address, City, State, Zip Code		
		NEW YORK, NY 10036		
	rincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	
	us Strat & I		Bank of America	<i>,</i> ,

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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 48/108 Rpt: 51/122	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Bank of Ame	erica State and Federal PAC			00080283	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/15/2024	Kennedy, Alan				\$25.00
		6 Contributor address; City; State; Zip Code		1		
Ļ	Drive sized oppu	NEW YORK, NY 10036				
8	Principal occu Bus Strat & I	ipation / Job title (See Instructions) Init Mar	9 Employer (See Instructions Bank of America	5)		
╞		-				
	Date)		Amount of Contribution (\$)	#00.00
	07/15/2024					\$29.00
		Contributor address; City; State; Zip Code				
		WESTERVILLE, OH 43082				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ج)		
	Sr Product M		Bank of America	.,		
╞	Date)	Т	Amount of Contribution (\$)	
	07/31/2024	Kirwin, Daniel	/		Amount of Contribution (\$)	\$29.00
	01102.222	Contributor address; City; State; Zip Code		1		*=0
		WESTERVILLE, OH 43082				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Sr Product M	Ingr	Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	08/15/2024	Kirwin, Daniel				\$29.00
		Contributor address; City; State; Zip Code		1		
\vdash	Dringing oog	WESTERVILLE, OH 43082	Employer (Cool Instructions			
	Sr Product N	ipation / Job title (See Instructions) Angr	Employer (See Instructions Bank of America	S)		
\vdash				1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 20.00
	08/31/2024	Kirwin, Daniel				\$29.00
		Contributor address; City; State; Zip Code				
		WESTERVILLE, OH 43082				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Sr Product M		Bank of America	-,		
\vdash		<u> </u>				

The Instruction Cuide explains how to complete this form	
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 49/108 Rpt: 52/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
09/15/2024 Kirwin, Daniel	\$29.
6 Contributor address; City; State; Zip Code	
WESTERVILLE, OH 43082	
	nployer (See Instructions)
Sr Product Mngr Ba	ank of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/30/2024 Kirwin, Daniel	\$29.
Contributor address; City; State; Zip Code	
WESTERVILLE, OH 43082	
Principal occupation / Job title (See Instructions) Er	nployer (See Instructions)
Sr Product Mngr Ba	ank of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
10/15/2024 Kirwin, Daniel	\$29.
Contributor address; City; State; Zip Code	
WESTERVILLE, OH 43082	
Principal occupation / Job title (See Instructions) Er	nployer (See Instructions)
Sr Product Mngr Ba	ank of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/15/2024 Knafelz, Richard	\$50.
	\$50.
07/15/2024 Knafelz, Richard	\$50.
07/15/2024 Knafelz, Richard	\$50.
07/15/2024 Knafelz, Richard	\$50.
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255	\$50.
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Er	\$50.
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Er	\$50. mployer (See Instructions)
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Sr Business Exec - Tech Date Full name of contributor 07/31/2024 Knafelz, Richard	mployer (See Instructions) ank of America) Amount of Contribution (\$) \$50.
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Sr Business Exec - Tech Date Full name of contributor	mployer (See Instructions) ank of America) Amount of Contribution (\$) \$50.
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Sr Business Exec - Tech Date Full name of contributor 07/31/2024 Knafelz, Richard	mployer (See Instructions) ank of America) Amount of Contribution (\$) \$50.
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Sr Business Exec - Tech Date Full name of contributor 07/31/2024 Knafelz, Richard	mployer (See Instructions) ank of America) Amount of Contribution (\$) \$50.
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Sr Business Exec - Tech Date Full name of contributor 07/31/2024 Knafelz, Richard	mployer (See Instructions) ank of America) Amount of Contribution (\$) \$50.
07/15/2024 Knafelz, Richard Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 Principal occupation / Job title (See Instructions) Sr Business Exec - Tech Date Full name of contributor 07/31/2024 Knafelz, Richard Contributor address; City; State; Zip Code ChARLOTTE, NC 28255	mployer (See Instructions) ank of America) Amount of Contribution (\$) \$50.

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The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 50/108 Rpt: 53/122	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/15/2024			\$	\$50.00
	6 Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Sr Business	s Exec - Tech	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/31/2024	—		\$	50.00
	CHARLOTTE, NC 28255			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Business	s Exec - Tech	Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024		,		50.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
	s Exec - Tech	Bank of America	, ,	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024		/		\$50.00
00/00/202 .	· · · · · · · · · · · · · · · · · · ·		Ŧ	00.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
	s Exec - Tech	Bank of America	/	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
10/15/2024		,		50.00
10/10/2024	·		Ý	50.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
	s Exec - Tech	Bank of America)	
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	The Instru	ction Guide explains how to complete this f	iorm.		Total pages Schedule A1: Sch: 51/108 Rpt: 54/122	
2	FILER NAME		+	3	Filer ID (Ethics Commission	Filers)
		erica State and Federal PAC			00080283	- ,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	07/15/2024	Koenig, Trevor	ļ			\$50.00
		6 Contributor address; City; State; Zip Code		1		
			ļ			
		WILMINGTON, DE 19884				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	s)		
	Communicat	tions Exec I	Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	07/31/2024	Koenig, Trevor				\$50.00
		Contributor address; City; State; Zip Code				
			ļ			
			ļ			
		WILMINGTON, DE 19884	ļ			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Communicat		Bank of America			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	T.	Amount of Contribution (\$)	
	08/15/2024	Koenig, Trevor				\$50.00
	00,20,21	Contributor address; City; State; Zip Code				TO
		Contributor address, City, State, Zip Code	ļ			
			ļ			
		WILMINGTON, DE 19884	ļ			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	⊥ s)		
	Communicat		Bank of America			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	08/31/2024	Koenig, Trevor	,			\$50.00
	00,01,202	Contributor address; City; State; Zip Code				400.00
		Continuutor address, City, State, Zip Code	ļ			
			ļ			
		WILMINGTON, DE 19884	ļ			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Communicat		Bank of America	- /		
╞	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	T	Amount of Contribution (\$)	
	09/15/2024	Koenig, Trevor	······································	'		\$50.00
	00/10/202 .	Contributor address; City; State; Zip Code		-		Ψ00.00
			ļ			
			ļ			
		WILMINGTON, DE 19884	ļ			
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u>		
	Communicat		Bank of America	5)		
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The Instru	uction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 52/108 Rpt: 55/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Bank of Am	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/30/2024	Koenig, Trevor		\$50	0.00
	6 Contributor address; City; State; Zip Code			
	WILMINGTON, DE 19884			
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Communica	ations Exec I	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024				0.00
-				
	WILMINGTON, DE 19884			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	;)	
-	ations Exec I	Bank of America	, ,	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/15/2024		/		0.00
01,10,101	Contributor address; City; State; Zip Code			0.00
	Collinguiti address, City, State, Zip Code			
	JACKSONVILLE, FL 32256			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	;)	
	ion Services Lead	Bank of America	·	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024		/		0.00
01102.202	Contributor address; City; State; Zip Code			0.00
	Collinguiti address, City, State, Zip Code			
	JACKSONVILLE, FL 32256			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	l ;)	
	ion Services Lead	Bank of America	·	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
08/15/2024		/		0.00
00.11.11	Contributor address; City; State; Zip Code			0.02
	Continuation dudiess, City, State, Zip Code			
	JACKSONVILLE, FL 32256			
Princinal occ	upation / Job title (See Instructions)	Employer (See Instructions	<i></i>	
	ion Services Lead	Bank of America		
0				

The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 53/108 Rpt: 56/122	
2 FILER NAME			3 Filer ID (Ethics Commission F	ilers)
	erica State and Federal PAC		00080283	10.2,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/31/2024	LaRoche, Sherry			\$20.00
	6 Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions))	
	on Services Lead	Bank of America)	
Date)	Amount of Contribution (\$)	**** 00
09/15/2024	LaRoche, Sherry			\$20.00
	Contributor address; City; State; Zip Code			
Dringing ogg	JACKSONVILLE, FL 32256		N	
	pation / Job title (See Instructions) on Services Lead	Employer (See Instructions) Bank of America)	
Date)	Amount of Contribution (\$)	
09/30/2024	LaRoche, Sherry			\$20.00
	Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions))	
	on Services Lead	Bank of America)	
Date			Amount of Contribution (\$)	
10/15/2024	LaRoche, Sherry)	ΑΠΙΟΦΠΕΟΓΟΟΠΕΙΟΦΙΟΤΕ(Φ)	\$20.00
10/13/2024	-			φ20.00
	Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions))	
	on Services Lead	Bank of America	/	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
07/15/2024	Liotta, Sandra	/		\$50.00
01/10/2021	Contributor address: City: State: Zip Code			Ψ00.00
	Contributor address, City, State, Zip Code			
	TOWSON, MD 21204			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions))	
Sr Resident I		Bank of America		

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 54/108 Rpt: 57/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	;)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/15/2024	Liotta, Sandra		\$50	0.00
	6 Contributor address; City; State; Zip Code			
	TOWSON, MD 21204			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Sr Resident	Director	Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024	Liotta, Sandra			0.00
	TOWSON, MD 21204			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Sr Resident	Director	Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Liotta, Sandra			0.00
	Contributor address; City; State; Zip Code			
	TOWSON, MD 21204			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Sr Resident	Director	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)	
07/15/2024	Livingstone, William		\$23	3.00
	Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
-	upation / Job title (See Instructions)	Employer (See Instructions	8)	
SAG Sr. Exe	ecutive II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	Livingstone, William		\$23	3.00
	Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
-	upation / Job title (See Instructions)	Employer (See Instructions	5)	
SAG Sr. Exe	ecutive II	Bank of America		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 55/108 Rpt: 58/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Bank of Ame	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/15/2024	Livingstone, William		\$23.00
	6 Contributor address; City; State; Zip Code		
	DALLAS, TX 75202		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
SAG Sr. Exe	ecutive II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024	Livingstone, William		\$23.00
	Contributor address; City; State; Zip Code		1
Dringing Loop	DALLAS, TX 75202		,
SAG Sr. Exe	upation / Job title (See Instructions)	Employer (See Instructions Bank of America	5)
			1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024	Livingstone, William		\$23.00
	Contributor address; City; State; Zip Code		
	DALLAS, TX 75202		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
SAG Sr. Exe	ecutive II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024	Livingstone, William		\$23.00
	Contributor address; City; State; Zip Code		
Drippingl oppu	DALLAS, TX 75202	Employer (Coo Instructions	
SAG Sr. Exe	upation / Job title (See Instructions)	Employer (See Instructions Bank of America	5)
Date 10/15/2024	Full name of contributor out-of-state PAC (ID#: Livingstone, William)	Amount of Contribution (\$) \$23.00
10/10/2024	-		ψ20.00
	Contributor address; City; State; Zip Code		
	DALLAS, TX 75202		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
SAG Sr. Exe	ecutive II	Bank of America	

The Instru	uction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 56/108 Rpt: 59/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	- nerica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/15/2024	,		\$2:	21.00
	6 Contributor address; City; State; Zip Code		1	
Dringingloog	JACKSONVILLE, FL 32256			
-	upation / Job title (See Instructions)	9 Employer (See Instructions Bank of America	;)	
	upport Manager II	Ballk Of America	 	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024			\$2:	21.00
	Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
-	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Business Su	upport Manager II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/2024	· · · · · · · · · · · · · · · · · · ·		\$2:	21.00
	Contributor address; City; State; Zip Code		1	
	JACKSONVILLE, FL 32256			
	upation / Job title (See Instructions)	Employer (See Instructions	»)	
Business Su	upport Manager II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:	<u>. </u>	Amount of Contribution (\$)	
08/31/2024			\$2	21.00
	Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Business Sı	upport Manager II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/15/2024				21.00
	Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)	
-	upport Manager II	Bank of America	·	
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The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 57/108 Rpt: 60/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	lers)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/30/2024	Lofton, Scott			\$21.00
	6 Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>	
	pport Manager II	Bank of America)	
			Amount of Contribution (¢)	
Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	<u>ቀ</u> ጋ1 በበ
10/15/2024				\$21.00
	Contributor address; City; State; Zip Code			
	JACKSONVILLE, FL 32256			
Dringing occu	pation / Job title (See Instructions)	Employer (See Instructions		
· ·	pation / Job title (See Instructions) pport Manager II	Employer (See Instructions Bank of America)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/15/2024				\$28.20
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	epartment Head	Bank of America)	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
07/31/2024	Martin, Timothy	/		\$28.20
011011202-				Ψ20.20
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28255			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	epartment Head	Bank of America	,	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
08/15/2024	Martin, Timothy	/		\$28.20
00,10,202.	Contributor address: City: State: Zip Code			Ψ20.20
	Contributor address, City, State, Zip Code			
	CHARLOTTE, NC 28255			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	epartment Head	Bank of America)	

Bank of America State and Federal PAC 00080283				-		
Bank of America State and Federal PAC 00080283 4 Date 5 Full name of contribution out-of-state PAC (ID::::::::::::::::::::::::::::::::::::	The Instruc	ction Guide explains how to complete this f	orm.	1		
Bank of America State and Federal PAC 00080283 4 Date 5 Full name of contribution out-of-state PAC (ID::::::::::::::::::::::::::::::::::::	2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
08/31/2024 Martin, Timothy \$28.20 6 Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 7 Principal occupation / Job title (See Instructions) Research Department Head 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 09/15/2024 Commbutor address; City; State; Zip Code Employer (See Instructions) Bank of America Principal occupation / Job title (See Instructions) Research Department Head Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (Der) 09/30/2024 Full name of contributor out-of-state PAC (Der) 09/30/2024 Full name of contributor out-of-state PAC (Der) 09/30/2024 Full name of contributor out-of-state PAC (Der) 01/15/2024 Martin, Timothy S28.20 Contributor address; City; State; Zip Code		rica State and Federal PAC				
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Contributor address; City; State; Zip Code HOUSTON, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date	Full name of contributor out-of-state PAC (ID#:_)	Ī	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code HOUSTON, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions)	07/15/2024					\$25.00
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		HOUSTON, TX 77002				
Private Client Manager II Bank of America	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Private Clien	t Manager II	Bank of America			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 59/108 Rpt: 62/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Bank of Ame	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/31/2024	Martinez, Deborah Clemenson		\$25.00
	6 Contributor address; City; State; Zip Code		
	HOUSTON, TX 77002		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Private Clier	nt Manager II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)
08/15/2024	Martinez, Deborah Clemenson		\$25.00
	Contributor address; City; State; Zip Code		
	HOUSTON, TX 77002		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Private Clier	nt Manager II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/31/2024	Martinez, Deborah Clemenson		\$25.00
	Contributor address; City; State; Zip Code		
	HOUSTON, TX 77002		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)
Private Clier	nt Manager II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024	Martinez, Deborah Clemenson		\$25.00
	Contributor address; City; State; Zip Code		
	HOUSTON, TX 77002		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	.))
Private Clier	nt Manager II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/30/2024	Martinez, Deborah Clemenson		\$25.00
	Contributor address; City; State; Zip Code		
	HOUSTON, TX 77002		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	-
Private Clier	nt Manager II	Bank of America	

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 60/108 Rpt: 63/122	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
Bank of Ame	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
10/15/2024	Martinez, Deborah Clemenson			\$25.00
	6 Contributor address; City; State; Zip Code			
	HOUSTON, TX 77002			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Private Clier	nt Manager II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/15/2024				\$40.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>)</u>	
Al Technical		Bank of America)	
			Amount of Contribution (\$)	
Date 07/31/2024	Full name of contributor out-of-state PAC (ID#: McDuffee, Rosemary)	Amount of Contribution (\$)	\$40.00
0110112027				Ψ+0.00
	Continuation address, City, State, Zip Code			
	NEW YORK, NY 10036			
	ipation / Job title (See Instructions)	Employer (See Instructions)	;)	
AI Technical	Specialist	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_	<u>.</u>)	Amount of Contribution (\$)	
08/15/2024	McDuffee, Rosemary			\$40.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
	upation / Job title (See Instructions)	Employer (See Instructions))	
AI Technical		Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	± + 2 00
08/31/2024	McDuffee, Rosemary			\$40.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>)</u>	
Al Technical		Bank of America)	

The Ins	truction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 61/108 Rpt: 64/122	
2 FILER NA	ME		3 Filer ID (Ethics Commission Filers	s)
	America State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/15/20	24 McDuffee, Rosemary		\$4	10.00
	6 Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
	occupation / Job title (See Instructions)	9 Employer (See Instructions	<i>(</i>)	
Al Techr	ical Specialist	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/15/20			\$2	25.00
	Contributor address; City; State; Zip Code			
	HYANNIS, MA 02601			
Principal of	occupation / Job title (See Instructions)	Employer (See Instructions	;)	
Senior F	inancial Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/31/20			\$2	25.00
	Contributor address; City; State; Zip Code			
	HYANNIS, MA 02601			
	occupation / Job title (See Instructions)	Employer (See Instructions	;)	
Senior F	inancial Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/15/20	24 Mcabee, John		\$2	25.00
	Contributor address; City; State; Zip Code			
Di dest	HYANNIS, MA 02601			
	occupation / Job title (See Instructions)	Employer (See Instructions	i)	
Senior F	inancial Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/20	24 Mcabee, John		\$2	25.00
	Contributor address; City; State; Zip Code			
	HYANNIS, MA 02601	<u> </u>		
	occupation / Job title (See Instructions)	Employer (See Instructions	i)	
Senior F	inancial Advisor	Bank of America		

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 62/108 Rpt: 65/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/15/2024	Mcabee, John		\$25.0
	6 Contributor address; City; State; Zip Code		
	HYANNIS, MA 02601		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)
Senior Finar	ncial Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024	Mcabee, John		\$25.0
	Contributor address; City; State; Zip Code		
	HYANNIS, MA 02601		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)
Senior Finar	ncial Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)
10/15/2024	Mcabee, John		\$25.0
	Contributor address; City; State; Zip Code		
	HYANNIS, MA 02601		
-	upation / Job title (See Instructions)	Employer (See Instructions	i)
Senior Finar	ncial Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024	Meade, Gloria		\$20.
	Contributor address; City; State; Zip Code		
	NEW YORK, NY 10036		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	l ;)
Program Ma	nager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>)	Amount of Contribution (\$)
07/31/2024	Meade, Gloria)	\$20.0
	Contributor address: City: State: Zip Code		
	······································		
	NEW YORK, NY 10036		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)
Program Ma	nager	Bank of America	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 63/108 Rpt: 66/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Bank of Ame	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)	
08/15/2024	Meade, Gloria		\$2	20.00
	6 Contributor address; City; State; Zip Code	1		
	NEW YORK, NY 10036			
	upation / Job title (See Instructions)	9 Employer (See Instructions		
Program Ma	nager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
08/31/2024	Meade, Gloria		\$2	20.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Program Ma	Inager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:	t:)	Amount of Contribution (\$)	
09/15/2024	Meade, Gloria			20.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Program Ma	Inager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:	t:)	Amount of Contribution (\$)	
09/30/2024	Meade, Gloria		\$2	20.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Program Ma	nager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Meade, Gloria		\$2	20.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Program Ma	ınager	Bank of America		

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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 64/108 Rpt: 67/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	5)
	erica State and Federal PAC		00080283	" _
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/15/2024	Miller, Bradley		\$20	0.00
	6 Contributor address; City; State; Zip Code			
	EASTON, MD 21601			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Senior Finar	ncial Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	Miller, Bradley		\$20	0.00
	Contributor address; City; State; Zip Code			
	EASTON, MD 21601			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Senior Finar	ncial Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/2024	Miller, Bradley		\$20	0.00
	Contributor address; City; State; Zip Code			
- · · ·	EASTON, MD 21601		-	
	Ipation / Job title (See Instructions)	Employer (See Instructions))	
Senior Finar		Bank of America		
Date)	Amount of Contribution (\$)	
08/31/2024	Miller, Bradley		\$20	0.00
	Contributor address; City; State; Zip Code			
	EASTON, MD 21601			
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>)</u>	
Senior Finar		Bank of America)	
Date			Amount of Contribution (\$)	
09/15/2024	Full name of contributor out-of-state PAC (ID#: Miller, Bradley)	Amount of Contribution (\$)	0.00
00,10,202.	Contributor address; City; State; Zip Code			0.00
	Continuation address, City, State, Zip Code			
	EASTON, MD 21601			
Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions))	
Senior Finar		Bank of America	,	

)			
The Instru	iction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 65/108 Rpt: 68/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
09/30/2024	Miller, Bradley		\$20.
	6 Contributor address; City; State; Zip Code		
	EASTON, MD 21601		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	۲ ۵)
Senior Finar	ncial Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024		/	\$20.
	כטוווושעוטו מעטובשא, כווא, שומני, בוף כסעכ		
	EASTON, MD 21601		
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	ncial Advisor	Bank of America	<i>y</i>
Date			Amount of Contribution (\$)
07/15/2024)	Amount of Contribution (\$) \$20.
0111312024	· · · · · · · · · · · · · · · · · · ·		ψ20.
	Contributor address; City; State; Zip Code		
	VANCOUVER, WA 98660		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Private Clier		Bank of America	7
Date)	Amount of Contribution (\$)
07/31/2024			\$20.
	Contributor address; City; State; Zip Code		
	VANCOUVER, WA 98660		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Private Clier		Bank of America	·)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024	· · · · · · · · · · · · · · · · · · ·		\$20.
	Contributor address; City; State; Zip Code		
	VANCOUVER, WA 98660	1	<u> </u>
-	upation / Job title (See Instructions)	Employer (See Instructions	;)
Private Clier		Bank of America	

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 66/108 Rpt: 69/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/31/2024 Moss, David	\$20.00
6 Contributor address; City; State; Zip Code	
VANCOUVER, WA 98660	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions))
Private Client Advisor II Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024 Moss, David	\$20.00
Contributor address; City; State; Zip Code	
VANCOUVER, WA 98660	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Private Client Advisor II Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024 Moss, David	\$20.00
Contributor address; City; State; Zip Code	
VANCOUVER, WA 98660	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Private Client Advisor II Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024 Moss, David	
	\$20.00
Contributor address; City; State; Zip Code	\$20.00
	\$20.00
Contributor address; City; State; Zip Code	\$20.00
Contributor address; City; State; Zip Code VANCOUVER, WA 98660	
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Private Client Advisor II Employer (See Instructions) Bank of America)
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Private Client Advisor II Date Full name of contributor out-of-state PAC (ID#:)) Amount of Contribution (\$)
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Private Client Advisor II Date Full name of contributor 07/15/2024)
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Private Client Advisor II Date Full name of contributor Other O7/15/2024) Amount of Contribution (\$)
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Private Client Advisor II Date Full name of contributor 07/15/2024) Amount of Contribution (\$)
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Private Client Advisor II Date Full name of contributor O7/15/2024 Nail, Louise Contributor address; City; State; Zip Code) Amount of Contribution (\$)
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Private Client Advisor II Date Full name of contributor 07/15/2024 Nail, Louise Contributor address; City; State; Zip Code PHOENIX, AZ 85034) Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code VANCOUVER, WA 98660 Principal occupation / Job title (See Instructions) Private Client Advisor II Date Full name of contributor 07/15/2024 Nail, Louise Contributor address; City; State; Zip Code) Amount of Contribution (\$) \$25.00

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 67/108 Rpt: 70/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/31/2024	Nail, Louise		\$25.00
	6 Contributor address; City; State; Zip Code		
	PHOENIX, AZ 85034		
	upation / Job title (See Instructions)	9 Employer (See Instructions	;) ;)
Sr Operation	ns Project Manager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)
08/15/2024	Nail, Louise		\$25.00
	Contributor address; City; State; Zip Code		
	PHOENIX, AZ 85034	1	
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
-	ns Project Manager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024	Nail, Louise		\$25.00
	Contributor address; City; State; Zip Code		
	PHOENIX, AZ 85034		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	ns Project Manager	Bank of America	<i>''</i>
Date)	Amount of Contribution (\$)
09/15/2024	Nail, Louise	/	\$25.00
00.20.212	Contributor address; City; State; Zip Code		
	PHOENIX, AZ 85034		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)
Sr Operation	ns Project Manager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/30/2024	Nail, Louise		\$25.00
	Contributor address; City; State; Zip Code		
	PHOENIX, AZ 85034	1	
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Sr Operation	ns Project Manager	Bank of America	

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 68/108 Rpt: 71/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	·s)
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
10/15/2024	Nail, Louise		\$2	25.00
	6 Contributor address; City; State; Zip Code			
	PHOENIX, AZ 85034			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Sr Operation	ns Project Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/15/2024	Nair, Sanjeev		\$2	20.00
	Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Data Arch	nitect	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/31/2024	Nair, Sanjeev		\$2	20.00
	Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Data Arch	nitect	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/15/2024	Nair, Sanjeev		\$2	20.00
	Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Data Arch	nitect	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/31/2024	Nair, Sanjeev		\$2	20.00
	Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Sr Data Arch	nitect	Bank of America		

The Instruction Guide explains how to complete this for	m. 1	1 Total pages Schedule A1: Sch: 69/108 Rpt: 72/122
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC		00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7	7 Amount of Contribution (\$)
09/15/2024 Nair, Sanjeev		\$20.00
6 Contributor address; City; State; Zip Code		
PENNINGTON, NJ 08534		
	Employer (See Instructions)	
Sr Data Architect	Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024 Nair, Sanjeev		\$20.00
Contributor address; City; State; Zip Code		
PENNINGTON, NJ 08534		
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Sr Data Architect	Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024 Nair, Sanjeev		\$20.00
Contributor address; City; State; Zip Code		
PENNINGTON, NJ 08534		
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Sr Data Architect	Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024 Neuendorf, M		\$50.00
Contributor address; City; State; Zip Code		
MADISON, WI 53703		
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Wealth Management Advisor	Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024 Neuendorf, M		\$50.00
Contributor address; City; State; Zip Code		
MADISON, WI 53703		
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Wealth Management Advisor	Bank of America	
	Danie of Famorica	

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 70/108 Rpt: 73/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/15/2024	Neuendorf, M		\$50.
	6 Contributor address; City; State; Zip Code		
	MADISON, WI 53703		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))
Wealth Man	agement Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024			\$50.
	Contributor address; City; State; Zip Code		
	MADISON, WI 53703		1
	upation / Job title (See Instructions)	Employer (See Instructions))
Wealth Man	agement Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/15/2024	Neuendorf, M		\$50.
	Contributor address; City; State; Zip Code		
Dringing oog	MADISON, WI 53703		\
	upation / Job title (See Instructions) agement Advisor	Employer (See Instructions) Bank of America)
	-	<u> </u>	
Date)	Amount of Contribution (\$)
09/30/2024	Neuendorf, M		\$50.
	Contributor address; City; State; Zip Code		
	MADISON, WI 53703		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
Wealth Man	agement Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024			\$50.
	Contributor address; City; State; Zip Code		
	MADISON, WI 53703		1
	upation / Job title (See Instructions)	Employer (See Instructions))
Wealth Man	agement Advisor	Bank of America	

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 71/108 Rpt: 74/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	erica State and Federal PAC		00080283	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/15/2024	Odiorne, Mark		\$20	0.00
	6 Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28277			
	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Info Security	v Cyber Defense Sr Mana	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	Odiorne, Mark		\$20	0.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28277			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Info Security	v Cyber Defense Sr Mana	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/15/2024	Odiorne, Mark		\$20	0.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28277			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Info Security	v Cyber Defense Sr Mana	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Odiorne, Mark		\$20	0.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28277			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
Info Security	v Cyber Defense Sr Mana	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024	Odiorne, Mark		\$20	0.00
	Contributor address; City; State; Zip Code			
	CHARLOTTE, NC 28277			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Info Security	v Cyber Defense Sr Mana	Bank of America		
		1		

The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 72/108 Rpt: 75/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
09/30/2024	Odiorne, Mark		\$20
	6 Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28277		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))
Info Security	v Cyber Defense Sr Mana	Bank of America	
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/15/2024	Odiorne, Mark	,	\$20
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28277		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions))
Info Security	v Cyber Defense Sr Mana	Bank of America	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024	Oller, Mark	,	\$25
C	Contributor address; City; State; Zip Code		
	WILMINGTON, DE 19808	1	
	ipation / Job title (See Instructions)	Employer (See Instructions))
	ary Executive	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/31/2024	Oller, Mark		\$25
	Contributor address; City; State; Zip Code		
	WILMINGTON, DE 19808		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
	ary Executive	Bank of America	/
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
08/15/2024	Oller, Mark	/	\$25
00,10,202	Contributor address; City; State; Zip Code		
	Continuation address, City, State, Zip Code		
	WILMINGTON, DE 19808		
Principal occu	Inpation / Job title (See Instructions)	Employer (See Instructions))
	ary Executive	Bank of America	,

The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 73/108 Rpt: 76/122	
2 FILER NAME	3	Filer ID (Ethics Commission	Filers)
Bank of America State and Federal PAC		00080283	
4 Date 5 Full name of contributor out-of-state PAC (ID#:	_) 7	Amount of Contribution (\$)	
08/31/2024 Oller, Mark			\$25.00
6 Contributor address; City; State; Zip Code			
WILMINGTON, DE 19808			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instru	uctions)		
Trust Fiduciary Executive Bank of America			
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024 Oller, Mark		/ who are or element - ()	\$25.00
			Ψ20.00
Contributor address; City; State; Zip Code			
WILMINGTON, DE 19808			
Principal occupation / Job title (See Instructions) Employer (See Instru	ructions)		
Trust Fiduciary Executive Bank of America			
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/15/2024 Olson, John			\$25.00
			Ψ=====
Contributor address; City; State; Zip Code			
WEST PALM BEACH, FL 33401			
Principal occupation / Job title (See Instructions) Employer (See Instru	uctions)		
Wealth Management Advisor Bank of America			
Date Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
07/31/2024 Olson, John			\$25.00
Contributor address; City; State; Zip Code			
WEST PALM BEACH, FL 33401			
Principal occupation / Job title (See Instructions) Employer (See Instru			
	ucuons		
Wealth Management Advisor Bank of America			
Date Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	_
08/15/2024 Olson, John			\$25.00
Contributor address; City; State; Zip Code			
WEST PALM BEACH, FL 33401			
Principal occupation / Job title (See Instructions) Employer (See Instru			
Wealth Management Advisor Bank of America	ucuonaj		
Wealth Management Auvisor Dank of America			

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 74/108 Rpt: 77/122	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/31/2024	,			\$25.00
	6 Contributor address; City; State; Zip Code			
	WEST PALM BEACH, FL 33401			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
-	nagement Advisor	Bank of America	, ,	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
09/15/2024		/		\$25.00
00/10/202 .	Contributor address; City; State; Zip Code			Ψ20.00
	Contributor address, City, State, Zip Code			
	WEST PALM BEACH, FL 33401			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
·	nagement Advisor	Bank of America)	
Date			Amount of Contribution (\$)	
Date 09/30/2024)	Amount of Contribution (\$)	\$25.00
09/30/2024				\$20.00
	Contributor address; City; State; Zip Code			
	WEST PALM BEACH, FL 33401			
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
	nagement Advisor	Bank of America)	
		<u> </u>	Amount of Contribution (\$)	
Date 10/15/2024)	Amount of Contribution (\$)	\$25.00
10/13/2024	Olson, John			⊅ ∠ວ.∪∪
	Contributor address; City; State; Zip Code			
	WEST PALM BEACH, FL 33401			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
	agement Advisor	Bank of America)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	<u>ቀ</u> ጋር በበ
07/15/2024				\$25.00
	Contributor address; City; State; Zip Code			
	CHADI OTTE NO 20255			
D in sizel asso	CHARLOTTE, NC 28255		、	
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Program Ma	Inager	Bank of America		
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The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 75/108 Rpt: 78/122
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Bank of Ame	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/31/2024	Pankey, Brandon		\$25.0
	6 Contributor address; City; State; Zip Code		1
	CHARLOTTE, NC 28255		
	upation / Job title (See Instructions)	9 Employer (See Instructions	»)
Program Ma	nager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024	Pankey, Brandon		\$25.0
	Contributor address; City; State; Zip Code		1
	CHARLOTTE, NC 28255		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Program Ma	.nager	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/31/2024	Pankey, Brandon		\$25.0
	Contributor address; City; State; Zip Code		1
	CHARLOTTE, NC 28255	1	
-	upation / Job title (See Instructions)	Employer (See Instructions	;)
Program Ma	-	Bank of America	
Date)	Amount of Contribution (\$)
09/15/2024	Pankey, Brandon		\$25.0
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Program Ma		Bank of America	"
Date	-		Amount of Contribution (\$)
09/30/2024	Full name of contributor out-of-state PAC (ID#: Pankey, Brandon)	Amount of Contribution (\$) \$25.0
001001202-1			↓
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
Program Ma		Bank of America	, ,
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 76/108 Rpt: 79/122	
2	FILER NAME			3 1	Filer ID (Ethics Commission	Filers)
		erica State and Federal PAC			00080283	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/15/2024	Pankey, Brandon				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		CHARLOTTE, NC 28255				
8	Drincinal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u>		
Č	Program Ma		Bank of America	5)		
=		-		1		
	Date	Full name of contributor out-of-state PAC (ID#:_)	'	Amount of Contribution (\$)	±00.00
	07/15/2024					\$20.00
		Contributor address; City; State; Zip Code				
		INDIANAPOLIS, IN 46240	•			
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Local Marke	t Manager	Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:)	/	Amount of Contribution (\$)	
	07/31/2024	Pipes, Karen				\$20.00
		Contributor address; City; State; Zip Code		·		
		INDIANAPOLIS, IN 46240				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Local Marke	t Manager	Bank of America			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/15/2024	Pipes, Karen				\$20.00
		Contributor address; City; State; Zip Code		·		
		INDIANAPOLIS, IN 46240				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Local Marke	t Manager	Bank of America			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>		Amount of Contribution (\$)	
	08/31/2024	Pipes, Karen	/			\$20.00
	00/01/202	· · · · · · · · · · · · · · · · · · ·				Ψ=0.00
		Contributor address; City; State; Zip Code				
		INDIANAPOLIS, IN 46240				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Local Marke		Bank of America	5)		
			Dalik ULAIIIChica			

The Ins	truction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 77/108 Rpt: 80/122	_
2 FILER NA	MF		3 Filer ID (Ethics Commission File	ers)
	America State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/15/20			\$	\$20.00
	6 Contributor address; City; State; Zip Code			
	INDIANAPOLIS, IN 46240			
8 Principal	occupation / Job title (See Instructions)	9 Employer (See Instructions))	
	arket Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
09/30/20		,		\$20.00
00,01.1				20.01
	Cultinutur address, City, State, Zip Code			
	INDIANAPOLIS, IN 46240			
Principal	occupation / Job title (See Instructions)	Employer (See Instructions)	
	arket Manager	Bank of America)	
Date			Amount of Contribution (\$)	
10/15/20)	Amount of Contribution (\$)	\$20.00
			Ψ	\$20.00
	Contributor address; City; State; Zip Code			
	INDIANAPOLIS, IN 46240			
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>	
	arket Manager	Bank of America)	
			Amount of Contribution (¢)	
Date 07/15/20)	Amount of Contribution (\$)	\$50.00
07110720			ψ	\$50.00
	Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
Principal	occupation / Job title (See Instructions)	Employer (See Instructions))	
	olicy Issues Manager	Bank of America)	
Date		<u> </u>	Amount of Contribution (\$)	
07/31/20		/		\$50.00
01101120			Ý	50.00
	Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
Principal	occupation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
	olicy Issues Manager	Bank of America)	
	Jicy Issues manager	Dank of America		

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 78/108 Rpt: 81/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/15/2024	Power, Robert		\$50	.00
	6 Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Public Policy	y Issues Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Power, Robert		\$50	.00
	Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Public Policy	y Issues Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	_
09/15/2024	Power, Robert		\$50	.00
	Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Public Policy	y Issues Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/30/2024	Power, Robert		\$50	.00
	Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Public Policy	y Issues Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/15/2024	Power, Robert		\$50	.00
	Contributor address; City; State; Zip Code			
	DALLAS, TX 75202			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions))	
	y Issues Manager	Bank of America		

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	The Instru	ction Guide explains how to complete this f	form.		Total pages Schedule A1: Sch: 79/108 Rpt: 82/122	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		erica State and Federal PAC			00080283	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/15/2024	Putler, James				\$45.00
		6 Contributor address; City; State; Zip Code		1		
	<u> </u>	SACRAMENTO, CA 95814	<u> </u>	Ļ		
8	•	Ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Public Policy		Bank of America	<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	07/31/2024	Putler, James				\$45.00
		Contributor address; City; State; Zip Code		1		
	<u> </u>	SACRAMENTO, CA 95814	<u> </u>	Ļ		
	•	Ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Public Policy	/ Lead	Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	08/15/2024	Putler, James				\$45.00
		Contributor address; City; State; Zip Code		1		
	<u> </u>	SACRAMENTO, CA 95814		<u> </u>		
	•	Ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Public Policy	/ Lead	Bank of America	<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:_)]	Amount of Contribution (\$)	_
	08/31/2024	Putler, James				\$45.00
		Contributor address; City; State; Zip Code]		
	Dringingloog	SACRAMENTO, CA 95814		<u> </u>		
		Ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Public Policy		Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	·
	09/15/2024	Putler, James				\$45.00
		Contributor address; City; State; Zip Code				
	D i sinchees	SACRAMENTO, CA 95814		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Public Policy		Bank of America			
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 80/108 Rpt: 83/122	
2 FILER NAME			3 Filer ID (Ethics Commission F	Filers)
Bank of Ame	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/30/2024	Putler, James			\$45.00
	6 Contributor address; City; State; Zip Code			
	SACRAMENTO, CA 95814			
8 Principal occu	Ipation / Job title (See Instructions)	9 Employer (See Instructions))	
Public Policy		Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Putler, James	/		\$45.00
				T
	SACRAMENTO, CA 95814			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
Public Policy	/ Lead	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/15/2024	Ramirez, Rafael		1	\$30.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Process Des	sign Consultant II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	Ramirez, Rafael			\$30.00
	Contributor address; City; State; Zip Code			
Drinsing Loopu	WASHINGTON, DC 20006			
	ipation / Job title (See Instructions)	Employer (See Instructions) Bank of America)	
	sign Consultant II			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	÷~~ ~~
08/15/2024	Ramirez, Rafael			\$30.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
Dringing occu		Employer (See Instructions)	\	
	ipation / Job title (See Instructions) sign Consultant II	Employer (See Instructions) Bank of America)	
		Dalik Ul Allichica		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 81/108 Rpt: 84/122	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/31/2024	Ramirez, Rafael			\$30.00
	6 Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))	
Process Des	sign Consultant II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024	Ramirez, Rafael			\$30.00
	WASHINGTON, DC 20006			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
Process Des	sign Consultant II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024	Ramirez, Rafael			\$30.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Process Des	sign Consultant II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Ramirez, Rafael			\$30.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
	Ipation / Job title (See Instructions)	Employer (See Instructions))	
Process Des	sign Consultant II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	_
07/15/2024	Ridge, Richard			\$20.00
	Contributor address; City; State; Zip Code			
	RICHMOND, VA 23228			
	Ipation / Job title (See Instructions)	Employer (See Instructions))	
Sr Tech Myr	r-Sys Eng Anly	Bank of America		

The Inst	ruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 82/108 Rpt: 85/122	
2 FILER NAM	 /E		3 Filer ID (Ethics Commission Filers	s)
	merica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
07/31/202	4 Ridge, Richard		\$20	20.00
	6 Contributor address; City; State; Zip Code			
	RICHMOND, VA 23228			
	ccupation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Sr Tech M	lgr-Sys Eng Anly	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/15/202			\$20	20.00
	Contributor address; City; State; Zip Code			
	RICHMOND, VA 23228			
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	;)	
Sr Tech M	lgr-Sys Eng Anly	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/202			\$20	20.00
	Contributor address; City; State; Zip Code			
	RICHMOND, VA 23228			
	ccupation / Job title (See Instructions)	Employer (See Instructions)	
Sr Tech N	Igr-Sys Eng Anly	Bank of America		
Date)	Amount of Contribution (\$)	
09/15/202	4 Ridge, Richard		\$20	20.00
	Contributor address; City; State; Zip Code			
	RICHMOND, VA 23228			
Principal or	ccupation / Job title (See Instructions)	Employer (See Instructions		
-	Igr-Sys Eng Anly	Bank of America)	
Date 09/30/202	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	00.00
09/30/202			φζι	20.00
	Contributor address; City; State; Zip Code			
	RICHMOND, VA 23228			
Principal or	ccupation / Job title (See Instructions)	Employer (See Instructions	() ;)	
	Igr-Sys Eng Anly	Bank of America	,	
-	<u> </u>			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 83/108 Rpt: 86/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
10/15/2024 Ridge, Richard	\$20.00
6 Contributor address; City; State; Zip Code	
RICHMOND, VA 23228	
	ver (See Instructions)
Sr Tech Mgr-Sys Eng Anly Bank of	of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/15/2024 Riordan, Linda	\$30.00
Contributor address; City; State; Zip Code	
CHICAGO, IL 60606	
Principal occupation / Job title (See Instructions) Employ	ver (See Instructions)
Private Client Advisor II Bank of	of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/31/2024 Riordan, Linda	\$30.00
Contributor address; City; State; Zip Code	
CHICAGO, IL 60606	
Principal occupation / Job title (See Instructions) Employ	ver (See Instructions)
Private Client Advisor II Bank of	of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
08/15/2024 Riordan, Linda	\$30.00
Contributor address; City; State; Zip Code	
CHICAGO, IL 60606	
	ver (See Instructions)
Private Client Advisor II Bank of	of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
08/31/2024 Riordan, Linda	\$30.00
Contributor address; City; State; Zip Code	
CHICAGO, IL 60606	
	ver (See Instructions)
Private Client Advisor II Bank of	of America

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 84/108 Rpt: 87/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)	
09/15/2024	Riordan, Linda		\$3	30.00
	6 Contributor address; City; State; Zip Code			
	CHICAGO, IL 60606			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Private Clier	nt Advisor II	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
09/30/2024	Riordan, Linda			30.00
	CHICAGO, IL 60606			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions))	
Private Clier		Bank of America		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
10/15/2024	Riordan, Linda	+/		30.00
10/10/2024			ψu	0.00
	Contributor address; City; State; Zip Code			
	CHICAGO, IL 60606			
Bringinal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>\</u>	
Private Clier		Bank of America)	
Date		#:)	Amount of Contribution (\$)	
07/15/2024	Royes, Philip		\$2	25.00
	Contributor address; City; State; Zip Code			
- · · ·	PENNINGTON, NJ 08534			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Tech Projec	t Sr Manager-CapMkt	Bank of America		
Date	Full name of contributor Dut-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
07/31/2024	Royes, Philip		\$2!	25.00
	Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
Tech Projec	t Sr Manager-CapMkt	Bank of America		
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 85/108 Rpt: 88/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/15/2024 Royes, Philip	\$25.00
6 Contributor address; City; State; Zip Code	
PENNINGTON, NJ 08534	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructi	ions)
Tech Project Sr Manager-CapMkt Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024 Royes, Philip	\$25.00
Contributor address; City; State; Zip Code	
PENNINGTON, NJ 08534	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)
Tech Project Sr Manager-CapMkt Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/15/2024 Royes, Philip	\$25.00
Contributor address; City; State; Zip Code	
PENNINGTON, NJ 08534	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)
Tech Project Sr Manager-CapMkt Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024 Royes, Philip	\$25.00
Contributor address; City; State; Zip Code	
PENNINGTON, NJ 08534	
Principal occupation / Job title (See Instructions) Employer (See Instructi	ions)
Tech Project Sr Manager-CapMkt Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024 Royes, Philip	\$25.00
Contributor address; City; State; Zip Code	
PENNINGTON, NJ 08534	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)
Tech Project Sr Manager-CapMkt Bank of America	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 86/108 Rpt: 89/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	rica State and Federal PAC		00080283	
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
07/15/2024	Royster, Kristin		\$2	25.00
	6 Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Info Security	Executive	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/31/2024	Royster, Kristin		\$2	25.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
Info Security	Executive	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/2024	Royster, Kristin			25.00
ŀ	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
Info Security	Executive	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Royster, Kristin		\$2	25.00
· ·	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
Info Security	Executive	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024	Royster, Kristin			25.00
	Contributor address; City; State; Zip Code			
	WASHINGTON, DC 20006			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
Info Security		Bank of America		

The Instru	uction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 87/108 Rpt: 90/122
2 FILER NAMI	E		3 Filer ID (Ethics Commission Filers)
	nerica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/30/2024	Royster, Kristin		\$25.
	6 Contributor address; City; State; Zip Code		
	WASHINGTON, DC 20006		
	cupation / Job title (See Instructions)	9 Employer (See Instructions))
Info Securit	ty Executive	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/15/2024			\$25.
	Contributor address; City; State; Zip Code		
	WASHINGTON, DC 20006		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions))
Info Securit	ty Executive	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024			\$25.
	Contributor address; City; State; Zip Code		
	MIAMI, FL 33131		
	cupation / Job title (See Instructions)	Employer (See Instructions))
Intl Private	Wealth Advisor	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024			\$25.
	Contributor address; City; State; Zip Code		
	MIAMI, FL 33131		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	<u>)</u>
	Wealth Advisor	Bank of America)
Date			Amount of Contribution (\$)
08/15/2024		/	Amount of Contribution (\$) \$25.
0011012027	·		÷20.
	Contributor address; City; State; Zip Code		
	MIAMI, FL 33131		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	<u>لــــــــــــــــــــــــــــــــــــ</u>
	Wealth Advisor	Bank of America	,

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 88/108 Rpt: 91/122	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/31/2024			\$	\$25.00
	6 Contributor address; City; State; Zip Code			
	MIAMI, FL 33131			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
Intl Private V	Wealth Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/15/2024	Salvino, Richard		\$	\$25.00
	Contributor address; City; State; Zip Code			
	MIAMI, FL 33131			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Intl Private V	Wealth Advisor	Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024	Salvino, Richard			\$25.00
	Contributor address; City; State; Zip Code			
	MIAMI, FL 33131			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Intl Private V	Wealth Advisor	Bank of America		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Salvino, Richard	/		\$25.00
	Contributor address; City; State; Zip Code			
	MIAMI, FL 33131			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Intl Private V	Wealth Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)	
07/15/2024	Sawn, Thomas			\$25.00
-	Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
Principal occu	Lupation / Job title (See Instructions)	Employer (See Instructions	3)	
QA Lead - M		Bank of America	, ,	

The Inst	ruction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 89/108 Rpt: 92/122	
2 FILER NAI	ΛE		3 Filer ID (Ethics Commission I	Filers)
	merica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/31/202	4 Sawn, Thomas			\$25.00
	6 Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
8 Principal o	ccupation / Job title (See Instructions)	9 Employer (See Instructions)	
QA Lead		Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/202				\$25.00
				-
	PENNINGTON, NJ 08534			
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions)	
QA Lead	MKTS	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/202	4 Sawn, Thomas			\$25.00
	Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
	ccupation / Job title (See Instructions)	Employer (See Instructions		
QA Lead	· MKTS	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#)	Amount of Contribution (\$)	
09/15/202	4 Sawn, Thomas			\$25.00
	Contributor address; City; State; Zip Code			
L	PENNINGTON, NJ 08534	- · · · · · · · · · · · · · · · · · · ·		
	ccupation / Job title (See Instructions)	Employer (See Instructions		
QA Lead		Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/202	Sawn, Thomas			\$25.00
	Contributor address; City; State; Zip Code			
	PENNINGTON, NJ 08534			
	ccupation / Job title (See Instructions)	Employer (See Instructions)	
QA Lead	MKTS	Bank of America		

	The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 90/108 Rpt: 93/122	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		erica State and Federal PAC			00080283	,
4	Date	5 Full name of contributor Dut-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/15/2024	Sawn, Thomas				\$25.00
	1	6 Contributor address; City; State; Zip Code		1		
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		PENNINGTON, NJ 08534				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	QA Lead - M	IKTS	Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/15/2024	Seitz, Kristine				\$25.00
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	I	TAMPA, FL 33634				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		inagement Executive	Bank of America	3)		
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	Date	Full name of contributor out-of-state PAC (ID#:)	'	Amount of Contribution (\$)	#05 00
	07/31/2024	Seitz, Kristine				\$25.00
	ļ	Contributor address; City; State; Zip Code				
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		TAMPA, FL 33634				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Program Ma	inagement Executive	Bank of America			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/15/2024	Seitz, Kristine				\$25.00
		Contributor address; City; State; Zip Code		1		
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	l	TAMPA, FL 33634				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Program Ma	nagement Executive	Bank of America			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/31/2024	Seitz, Kristine			• -	\$25.00
		Contributor address; City; State; Zip Code		·		·
	l	Continuation address, City, State, Zip Code				
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	I	TAMPA, FL 33634				
┝	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		nagement Executive	Bank of America	5)		
	Programma		Dalik Ul Allienca			
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The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 91/108 Rpt: 94/122 2 FILER NAME Bank of America State and Federal PAC 3 Filer ID (Ethics Commission F 00080283 4 Date 09/15/2024 5 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) 7 TAMPA, FL 33634 9 Employer (See Instructions) Program Management Executive 9 Employer (See Instructions) Bank of America Date 09/30/2024 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine 9 Employer (See Instructions) Bank of America Amount of Contribution (\$) 09/30/2024 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) 9 Exployer (See Instructions) Program Management Executive Amount of Contribution (\$) 9/30/2024 Full name of contributor	ilers) \$25.00 \$25.00
Bank of America State and Federal PAC 00080283 4 Date 09/15/2024 5 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code 6 Contributor address; City; State; Zip Code 7 8 Principal occupation / Job title (See Instructions) Program Margement Executive 9 Employer (See Instructions) Bank of America 9 Date Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine 0ut-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) 09/30/2024 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) 09/30/2024 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	\$25.00
Bank of America State and Federal PAC 00080283 4 Date 09/15/2024 5 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code 6 Contributor address; City; State; Zip Code 7 8 Principal occupation / Job title (See Instructions) Program Margement Executive 9 Employer (See Instructions) Bank of America 9 Date Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine 0ut-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) 09/30/2024 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) 09/30/2024 Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) TAMPA, FL 33634 Funders; City; State; Zip Code Funders; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	\$25.00
09/15/2024 Seitz, Kristine 6 Contributor address; City; State; Zip Code 7AMPA, FL 33634 TAMPA, FL 33634 8 Principal occuztion / Job title (See Instructions) Program Margement Executive 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) 09/30/2024 Seitz, Kristine Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) TAMPA, FL 33634 TAMPA, FL 33634	
6 Contributor address; City; State; Zip Code 7AMPA, FL 33634 TAMPA, FL 33634 8 Principal occupation / Job title (See Instructions) Program Management Executive 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Seitz, Kristine	
6 Contributor address; City; State; Zip Code TAMPA, FL 33634 TAMPA, FL 33634 8 Principal occupation / Job title (See Instructions) Program Management Executive 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Seitz, Kristine Amount of Contribution (\$) 09/30/2024 Seitz, Kristine Amount of Contribution (\$) Contributor address; City; State; Zip Code TAMPA, FL 33634 Principal occupation / Job title (See Instructions) Employer (See Instructions)	\$25.00
8 Principal occupation / Job title (See Instructions) Program Management Executive 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Seitz, Kristine	\$25.00
8 Principal occupation / Job title (See Instructions) Program Management Executive 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Seitz, Kristine Contributor address; City; State; Zip Code	\$25.00
Program Management Executive Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Seitz, Kristine	\$25.00
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Seitz, Kristine	\$25.00
09/30/2024 Seitz, Kristine Contributor address; City; State; Zip Code TAMPA, FL 33634 Principal occupation / Job title (See Instructions) Employer (See Instructions)	\$25.00
09/30/2024 Seitz, Kristine Contributor address; City; State; Zip Code TAMPA, FL 33634 Principal occupation / Job title (See Instructions) Employer (See Instructions)	\$25.00
Contributor address; City; State; Zip Code TAMPA, FL 33634 Principal occupation / Job title (See Instructions) Employer (See Instructions)	
TAMPA, FL 33634 Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	r
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Descrete Management Executive	
Program Management Executive Bank of America	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
10/15/2024 Seitz, Kristine	\$25.00
Contributor address; City; State; Zip Code	
TAMPA, FL 33634	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Program Management Executive Bank of America	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
07/15/2024 Silvanic, Robert	\$24.00
Contributor address; City; State; Zip Code	
ALBANY, NY 12207	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Sr Service Delivery Manager Bank of America	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/31/2024 Silvanic, Robert Image: Contribution (\$)	\$24.00
	Ψ24.00
Contributor address; City; State; Zip Code	
ALBANY, NY 12207	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 92/108 Rpt: 95/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Bank of Ame	erica State and Federal PAC		00080283	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/15/2024	Silvanic, Robert		\$2	24.00
	6 Contributor address; City; State; Zip Code			
	ALBANY, NY 12207			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	
Sr Service D	Delivery Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Silvanic, Robert			24.00
	Contributor address; City; State; Zip Code			
	ALBANY, NY 12207			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Sr Service D	Delivery Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024	Silvanic, Robert		\$2	24.00
	Contributor address; City; State; Zip Code			
	ALBANY, NY 12207			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Sr Service D	Delivery Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/30/2024	Silvanic, Robert		\$2	24.00
	Contributor address; City; State; Zip Code			
	ALBANY, NY 12207			
	upation / Job title (See Instructions)	Employer (See Instructions)	
Sr Service D	Delivery Manager	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/15/2024	Silvanic, Robert		\$2	24.00
	Contributor address; City; State; Zip Code			
	ALBANY, NY 12207	i		
-	upation / Job title (See Instructions)	Employer (See Instructions)	
Sr Service D	Delivery Manager	Bank of America		

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 93/108 Rpt: 96/122
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		erica State and Federal PAC		00080283
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	07/15/2024	Sleight, James		\$20.00
		6 Contributor address; City; State; Zip Code		1
		HARTFORD, CT 06103		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	S)
_	Senior Finan	icial Advisor	Bank of America	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/31/2024	Sleight, James		\$20.00
		Contributor address; City; State; Zip Code		
		HARTFORD, CT 06103		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	S)
	Senior Finan	icial Advisor	Bank of America	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/15/2024	Sleight, James		\$20.00
		Contributor address; City; State; Zip Code		
		HARTFORD, CT 06103		
		upation / Job title (See Instructions)	Employer (See Instructions	3)
	Senior Finan	icial Advisor	Bank of America	
	Date)	Amount of Contribution (\$)
	08/31/2024	Sleight, James		\$20.00
		Contributor address; City; State; Zip Code		
		HARTFORD, CT 06103		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
	Senior Finan	ncial Advisor	Bank of America	
	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/15/2024	Sleight, James		\$20.00
		Contributor address; City; State; Zip Code		
		HARTFORD, CT 06103		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
	Senior Finan	ncial Advisor	Bank of America	
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The Ins	truction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 94/108 Rpt: 97/122	
2 FILER NA	ME		3 Filer ID (Ethics Commission F	-ilers)
	America State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/30/20				\$20.00
	6 Contributor address; City; State; Zip Code			
	HARTFORD, CT 06103			
8 Principal of	occupation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Senior Fi	nancial Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/20	24 Sleight, James			\$20.00
	HARTFORD, CT 06103			
Principal o	pecupation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)	
	nancial Advisor	Bank of America	,	
			Amount of Contribution (\$)	
Date)	Amount of Contribution (\$)	¢25.00
07/15/20				\$25.00
	Contributor address; City; State; Zip Code			
	INDIANAPOLIS, IN 46240			
Dringingle		Employer (Cool Instructions		
	occupation / Job title (See Instructions)	Employer (See Instructions	5)	
	Relationship Manager-R	Bank of America		
Date)	Amount of Contribution (\$)	
07/31/20	24 Smith, Brian			\$25.00
	Contributor address; City; State; Zip Code			
	INDIANAPOLIS, IN 46240			
	occupation / Job title (See Instructions)	Employer (See Instructions	3)	
GCB Sr I	Relationship Manager-R	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/20	24 Smith, Brian			\$25.00
	Contributor address; City; State; Zip Code			
	INDIANAPOLIS, IN 46240			
Principal o	beccupation / Job title (See Instructions)	Employer (See Instructions	;)	
GCB Sr I	Relationship Manager-R	Bank of America		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 95/108 Rpt: 98/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
08/31/2024 Smith, Brian	\$25.00
6 Contributor address; City; State; Zip Code	
INDIANAPOLIS, IN 46240	
8 Principal occupation / Job title (See Instructions) 9 Employer (S	See Instructions)
GCB Sr Relationship Manager-R Bank of Ar	nerica
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/15/2024 Smith, Brian	\$25.00
Contributor address; City; State; Zip Code	
INDIANAPOLIS, IN 46240	
Principal occupation / Job title (See Instructions) Employer (S	See Instructions)
GCB Sr Relationship Manager-R Bank of Ar	nerica
Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)
09/30/2024 Smith, Brian	\$25.00
Contributor address; City; State; Zip Code	
INDIANAPOLIS, IN 46240	
Principal occupation / Job title (See Instructions) Employer (S	See Instructions)
GCB Sr Relationship Manager-R Bank of Ar	nerica
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
10/15/2024 Smith, Brian	\$25.00
Contributor address; City; State; Zip Code	
INDIANAPOLIS, IN 46240	
	See Instructions)
GCB Sr Relationship Manager-R Bank of Ar	nerica
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/15/2024 Stanley, Jonathan	\$25.00
Contributor address; City; State; Zip Code	
JERSEY CITY, NJ 07302	
	See Instructions)
Sr Tech Mgr-Sys Eng Anly Bank of Ar	nerica

The Instruction Guide explains how to complete this form	1 Total pages Schedule A1: Sch: 96/108 Rpt: 99/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
07/31/2024 Stanley, Jonathan	\$25.00
6 Contributor address; City; State; Zip Code	
JERSEY CITY, NJ 07302	
8 Principal occupation / Job title (See Instructions) 9 E	Employer (See Instructions)
Sr Tech Mgr-Sys Eng Anly E	3ank of America
Date Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$)
08/15/2024 Stanley, Jonathan	\$25.00
JERSEY CITY, NJ 07302	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Sr Tech Mgr-Sys Eng Anly E	Bank of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
08/31/2024 Stanley, Jonathan	\$25.00
Contributor address; City; State; Zip Code	
JERSEY CITY, NJ 07302	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Sr Tech Mgr-Sys Eng Anly E	Bank of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/15/2024 Stanley, Jonathan	\$25.00
Contributor address; City; State; Zip Code	
JERSEY CITY, NJ 07302	
	Employer (See Instructions)
Sr Tech Mgr-Sys Eng Anly E	Bank of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/30/2024 Stanley, Jonathan	\$25.00
Contributor address; City; State; Zip Code	
JERSEY CITY, NJ 07302	
	Employer (See Instructions)
Sr Tech Mgr-Sys Eng Anly E	Bank of America

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 97/108 Rpt: 100/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/15/2024 Stanley, Jonathan	\$25.00
6 Contributor address; City; State; Zip Code	
JERSEY CITY, NJ 07302	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction	ons)
Sr Tech Mgr-Sys Eng Anly Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/15/2024 Stranz, Paul	\$25.00
Contributor address; City; State; Zip Code	
DALLAS, TX 75202	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Senior Public Policy Lead Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024 Stranz, Paul	\$25.00
Contributor address; City; State; Zip Code	
DALLAS, TX 75202	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Senior Public Policy Lead Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024 Stranz, Paul	\$25.00
Contributor address; City; State; Zip Code	
DALLAS, TX 75202	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Senior Public Policy Lead Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024 Stranz, Paul	\$25.00
Contributor address; City; State; Zip Code	
DALLAS, TX 75202	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Senior Public Policy Lead Bank of America	

	1 Total pages Schedule A1: Sch: 98/108 Rpt: 101/122
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283
4 Date 5 Full name of contributor index out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/15/2024 Stranz, Paul	\$25.00
6 Contributor address; City; State; Zip Code	
DALLAS, TX 75202	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions))
Senior Public Policy Lead Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024 Stranz, Paul	\$25.00
Contributor address; City; State; Zip Code	
DALLAS, TX 75202	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Senior Public Policy Lead Bank of America	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/15/2024 Stranz, Paul	\$25.00
Contributor address; City; State; Zip Code	
DALLAS, TX 75202 Principal occupation / Job title (See Instructions) Employer (See Instructions)	<u>\</u>
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Public Policy Lead Bank of America Date Full name of contributor out-of-state PAC (ID#:) 07/15/2024 Thompson, Holly	Amount of Contribution (\$) \$60.00) Amount of Contribution (\$) \$60.00

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The Instruc	tion Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 99/108 Rpt: 102/122	
2 FILER NAME			3 Filer ID (Ethics Commission	n Filers)
Bank of Amer	rica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/15/2024	Thompson, Holly			\$60.00
1	6 Contributor address; City; State; Zip Code			
	LAKEWOOD RANCH, FL 34202		、 、	
		9 Employer (See Instructions)	3)	
wealth wana	gement Advisor	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Thompson, Holly			\$60.00
	Contributor address; City; State; Zip Code			
	LAKEWOOD RANCH, FL 34202			
Principal occur	Dation / Job title (See Instructions)	Employer (See Instructions)	<u></u>	
		Employer (See manucuons)	\$)	
	gement Advisor	Bank of America		
Wealth Mana	gement Advisor	Bank of America		
Wealth Mana	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
Wealth Mana	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$60.00
Wealth Mana	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$60.00
Wealth Mana	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$60.00
Wealth Mana	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$60.00
Wealth Mana Date 09/15/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code)		\$60.00
Wealth Mana Date 09/15/2024 Principal occup	Full name of contributor out-of-state PAC (ID#:)		\$60.00
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana	Full name of contributor out-of-state PAC (ID#:) Employer (See Instructions) Bank of America	5)	\$60.00
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) igement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_) Employer (See Instructions) Bank of America		
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Out-of-state PAC (ID#:_) Employer (See Instructions) Bank of America	5)	\$60.00
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) igement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_) Employer (See Instructions) Bank of America	5)	
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Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Out-of-state PAC (ID#:_) Employer (See Instructions) Bank of America	5)	
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code) Employer (See Instructions) Bank of America	S) Amount of Contribution (\$)	
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024 Principal occup	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) Igement Advisor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) Igement Advisor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Date PAC (ID#:_	Employer (See Instructions) Bank of America	S) Amount of Contribution (\$)	
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024 Principal occup	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions)	Employer (See Instructions) Bank of America) Employer (See Instructions) Bank of America	S) Amount of Contribution (\$)	
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024 Principal occup Wealth Mana	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) Igement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) Image: Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) Imagement Advisor	Employer (See Instructions) Bank of America) Employer (See Instructions) Bank of America	Amount of Contribution (\$)	
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024 Principal occup Wealth Mana Date	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Out-of-state PAC (ID#:_	Employer (See Instructions) Bank of America) Employer (See Instructions) Bank of America	Amount of Contribution (\$)	\$60.00
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024 Principal occup Wealth Mana Date	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) out-of-state PAC (ID#:_ Thompson, Holly Out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) Index of Contributor Out-of-state PAC (ID#:_ Full name of contributor Out-of-state PAC (ID#:_ Full name of contributor Out-of-state PAC (ID#:_	Employer (See Instructions) Bank of America) Employer (See Instructions) Bank of America	Amount of Contribution (\$)	\$60.00
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024 Principal occup Wealth Mana Date	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Out-of-state PAC (ID#:_	Employer (See Instructions) Bank of America) Employer (See Instructions) Bank of America	Amount of Contribution (\$)	\$60.00
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024 Principal occup Wealth Mana Date	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor out-of-state PAC (ID#:_ Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Out-of-state PAC (ID#:_	Employer (See Instructions) Bank of America) Employer (See Instructions) Bank of America	Amount of Contribution (\$)	\$60.00
Wealth Mana Date 09/15/2024 Principal occup Wealth Mana Date 09/30/2024 Principal occup Wealth Mana Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code LAKEWOOD RANCH, FL 34202 Dation / Job title (See Instructions) gement Advisor gement Advisor Full name of contributor out-of-state PAC (ID#:_ Thompson, Holly Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code	Employer (See Instructions) Bank of America) Employer (See Instructions) Bank of America	Amount of Contribution (\$) Amount of Contribution (\$) Amount of Contribution (\$)	\$60.00

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1:
	· · ·		Sch: 100/108 Rpt: 103/122
2 FILER NAME Bank of Ame	erica State and Federal PAC		 Filer ID (Ethics Commission Filers) 00080283
4 Date)	7 Amount of Contribution (\$)
4 Date 07/15/2024)	330.0° \$30.0°
01110/2024	6 Contributor address; City; State; Zip Code		400.0
	CHARLOTTE, NC 28255		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)
Business Ex	kec - Technology	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/31/2024	Wall, George		\$30.0
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
	upation / Job title (See Instructions)	Employer (See Instructions Bank of America	
	kec - Technology		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024	Wall, George		\$30.0
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)
	kec - Technology	Bank of America	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/31/2024	Wall, George	······································	\$30.0
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
	upation / Job title (See Instructions)	Employer (See Instructions)
Business Ex	kec - Technology	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/15/2024	Wall, George		\$30.0
	Contributor address; City; State; Zip Code		
	CHARLOTTE, NC 28255		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)
-	kec - Technology	Bank of America	7
		Baint of America	

1 Total pages Schedule A1: Sch: 101/108 Rpt: 104/122 2 FILER NAME Bank of America 3 Filer ID (Ethics Commission Filers) 00080283 4 Date 09/30/2024 5 Full name of contributor out-of-state PAC (ID#:) Wall, George 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) Business Exe - Technology 9 Employer (See Instructions) Bank of America Date 01/15/2024 Full name of contributor out-of-state PAC (ID#:) (D1/15/2024 Amount of Contribution (\$)
Bank of America State and Federal PAC 00080283 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 09/30/2024 Wall, George 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code Full name of contributor 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$30 10/15/2024 Wall, George Contributor address; City; State; Zip Code \$30 \$30
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 09/30/2024 Wall, George \$30 6 Contributor address; City; State; Zip Code \$30 CHARLOTTE, NC 28255 CHARLOTTE, NC 28255 \$9 8 Principal occupation / Job title (See Instructions) Business Exec - Technology 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/15/2024 Wall, George \$30 Contributor address; City; State; Zip Code \$30
09/30/2024 Wall, George \$30. 6 Contributor address; City; State; Zip Code \$30. 6 Contributor address; City; State; Zip Code \$30. 8 Principal occupation / Job title (See Instructions) Business Exec - Technology 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/15/2024 Wall, George \$30. Contributor address; City; State; Zip Code \$30.
6 Contributor address; City; State; Zip Code 6 CHARLOTTE, NC 28255 8 Principal occupation / Job title (See Instructions) Business Exec - Technology 9 End technology Pull name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$30 10/15/2024 Wall, George Contributor address; City; State; Zip Code \$30
6 Contributor address; City; State; Zip Code CHARLOTTE, NC 28255 CHARLOTTE, NC 28255 8 Principal occupation / Job title (See Instructions) Business Exec - Technology 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/15/2024 Wall, George \$30 Contributor address; City; State; Zip Code \$30
8 Principal occupation / Job title (See Instructions) Business Exec - Technology 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/15/2024 Wall, George \$30 Contributor address; City; State; Zip Code Fill name of Contributor address; City; State; Zip Code Fill name of Contributor (\$)
8 Principal occupation / Job title (See Instructions) Business Exec - Technology 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/15/2024 Wall, George \$30 Contributor address; City; State; Zip Code Fill name of Contributor address; City; State; Zip Code Fill name of Contributor (\$)
8 Principal occupation / Job title (See Instructions) Business Exec - Technology 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/15/2024 Wall, George \$30 Contributor address; City; State; Zip Code Fill name of Contributor address; City; State; Zip Code Fill name of Contributor (\$)
Business Exec - Technology Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/15/2024 Wall, George \$30 Contributor address; City; State; Zip Code Image: Contributor address \$30
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/15/2024 Wall, George \$30. Contributor address; City; State; Zip Code \$30.
10/15/2024 Wall, George \$30 Contributor address; City; State; Zip Code
Contributor address; City; State; Zip Code
Contributor address; City; State; Zip Code
CHARLOTTE, NC 28255
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Business Exec - Technology Bank of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/15/2024 Weinstock, Elizabeth \$35
Contributor address; City; State; Zip Code
NEW YORK, NY 10036
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Business Exec - Technology Bank of America
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/31/2024 Weinstock, Elizabeth \$35
Contributor address; City; State; Zip Code
Contributor address; City; State; Zip Code
NEW YORK, NY 10036
NEW YORK, NY 10036 Principal occupation / Job title (See Instructions) Employer (See Instructions)
NEW YORK, NY 10036 Principal occupation / Job title (See Instructions) Business Exec - Technology Employer (See Instructions) Bank of America
NEW YORK, NY 10036 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Business Exec - Technology Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
NEW YORK, NY 10036 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Business Exec - Technology Bank of America
NEW YORK, NY 10036 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Business Exec - Technology Bank of America Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
NEW YORK, NY 10036 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Business Exec - Technology Bank of America Date Full name of contributor out-of-state PAC (ID#:) 08/15/2024 Weinstock, Elizabeth \$35
NEW YORK, NY 10036 Employer (See Instructions) Business Exec - Technology Date Full name of contributor out-of-state PAC (ID#:) 08/15/2024 Amount of Contribution (\$) Weinstock, Elizabeth \$35 Contributor address; City; State; Zip Code \$35
NEW YORK, NY 10036 Employer (See Instructions) Business Exec - Technology Date Full name of contributor out-of-state PAC (ID#:) 08/15/2024 Weinstock, Elizabeth Amount of Contribution (\$) Contributor address; City; State; Zip Code NEW YORK, NY 10036 Amount of Contribution (\$)
NEW YORK, NY 10036 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Business Exec - Technology Bank of America Date Full name of contributor out-of-state PAC (ID#:) 08/15/2024 Weinstock, Elizabeth Contributor address; City; State; Zip Code Amount of Contribution (\$) NEW YORK, NY 10036 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)
NEW YORK, NY 10036 Employer (See Instructions) Business Exe - Technology Date Full name of contributor 08/15/2024 Full name of contributor Weinstock, Elizabeth Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) NEW YORK, NY 10036 NEW YORK, NY 10036

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 102/108 Rpt: 105/122	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Bank of Ame	erica State and Federal PAC		00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/31/2024	Weinstock, Elizabeth		\$3	35.00
	6 Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Business Ex	xec - Technology	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024	Weinstock, Elizabeth			35.00
	Contributor address; City; State; Zip Code		.4	
	Contributor address, City, State, Eip Code			
	NEW YORK, NY 10036			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	l Is)	
	xec - Technology	Bank of America	.)	
Date			Amount of Contribution (\$)	
09/30/2024	Full name of contributor out-of-state PAC (ID#: Weinstock, Elizabeth)		35.00
03/30/2024				5.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	ls)	
Business Ex	xec - Technology	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Weinstock, Elizabeth		\$3	35.00
	Contributor address; City; State; Zip Code			
	NEW YORK, NY 10036			
-	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Business Ex	xec - Technology	Bank of America		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/15/2024	Wheeler, Jeffrey		\$2	26.00
	Contributor address; City; State; Zip Code			
	SAN FRANCISCO, CA 94104			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	ls)	
Sr Lease Pri	icing Specialist	Bank of America		

The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 103/108 Rpt: 106/122	
2 FILER NAME			3	Filer ID (Ethics Commission F	Filers)
	erica State and Federal PAC			00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
07/31/2024	Wheeler, Jeffrey				\$26.00
	6 Contributor address; City; State; Zip Code		1		
	SAN FRANCISCO, CA 94104				
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Sr Lease Pric	cing Specialist	Bank of America			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/15/2024	Wheeler, Jeffrey				\$26.00
			ł		
	SAN FRANCISCO, CA 94104				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	cing Specialist	Bank of America			
Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
08/31/2024	Wheeler, Jeffrey	/			\$26.00
00/01/2021	-		ł		Ψ20100
	Contributor address; City; State; Zip Code				
	SAN FRANCISCO, CA 94104				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	cing Specialist	Bank of America	-,		
Date			Ι	Amount of Contribution (\$)	
09/15/2024)		Amount of Contribution (\$)	\$26.00
09/13/2024	Wheeler, Jeffrey		•		Φ20.00
	Contributor address; City; State; Zip Code				
	SAN FRANCISCO, CA 94104				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	cing Specialist	Bank of America	,		
			T	Amount of Contribution (\$)	
Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Wheeler, Jeffrey)		Amount of Contribution (\$)	\$26.00
0913012024	-		•		Φ20.00
	Contributor address; City; State; Zip Code				
	SAN FRANCISCO, CA 94104				
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6 Contributor address: City; State; Zip Code SAN FRANCISCO, CA 94104 8 Principal occupation / Job title (See Instructions) Sr Lease Pricing Specialist 9 Employer (See Instructions) Bank of America Date Full name of contributor out-of-state PAC (IDE:				
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Contributor address; City; State; Zip Code CHICAGO, IL 60606 Principal occupation / Job title (See Instructions) Public Policy Lead Date Full name of contributor 08/31/2024 Wlodarski, Simon	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Contributor address; City; State; Zip Code CHICAGO, IL 60606 Principal occupation / Job title (See Instructions) Employer (See Instructions) Public Policy Lead Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/31/2024 Wlodarski, Simon \$25	08/15/2024	Wlodarski, Simon		\$25.00
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Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/31/2024 Wlodarski, Simon \$25			Employer (See Instructions)	()
08/31/2024 Wlodarski, Simon \$25	Public Policy	/ Lead	Bank of America	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/31/2024			\$25.00
CHICAGO, IL 60606		CHICAGO, IL 60606		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	i)
Public Policy Lead Bank of America			Donk of Amorico	
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The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 105/108 Rpt: 108/122	
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
Bank of Ame	erica State and Federal PAC			00080283	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/15/2024	Wlodarski, Simon				\$25.00
	6 Contributor address; City; State; Zip Code		"		
	CHICAGO, IL 60606				
	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Public Policy	/ Lead	Bank of America			
Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
09/30/2024	Wlodarski, Simon				\$25.00
	Contributor address; City; State; Zip Code				
	CHICAGO, IL 60606				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Public Policy	/ Lead	Bank of America			
Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
10/15/2024	Wlodarski, Simon				\$25.00
	Contributor address; City; State; Zip Code		"		
	CHICAGO, IL 60606				
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Public Policy	/ Lead	Bank of America			
Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
07/15/2024	Worthington, Karen				\$25.00
	Contributor address; City; State; Zip Code		"		
	WILMINGTON, DE 19884	1			
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Marketing Pi	roduct Mgr II	Bank of America			
Date	Full name of contributor out-of-state PAC (ID#:_)	Т	Amount of Contribution (\$)	
07/31/2024	Worthington, Karen				\$25.00
	Contributor address; City; State; Zip Code		"		
	WILMINGTON, DE 19884	•			
-	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Marketing Pr	roduct Mgr II	Bank of America			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

			1 Total pages Schedule A1:
The Instruction Guide explains how to complete this form.			Sch: 106/108 Rpt: 109/122
2 FILER NAME	E		3 Filer ID (Ethics Commission Filers)
Bank of Am	erica State and Federal PAC		00080283
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
08/15/2024			\$25.00
	6 Contributor address; City; State; Zip Code		
	WILMINGTON, DE 19884		
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Marketing F	Product Mgr II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)
08/31/2024	Worthington, Karen		\$25.00
	Contributor address; City; State; Zip Code		
	WILMINGTON, DE 19884		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
Marketing F	Product Mgr II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/15/2024	Worthington, Karen		\$25.00
	Contributor address; City; State; Zip Code		1
	WILMINGTON, DE 19884		
	upation / Job title (See Instructions)	Employer (See Instructions	s)
Marketing F	Product Mgr II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/30/2024	Worthington, Karen		\$25.00
	Contributor address; City; State; Zip Code		
	WILMINGTON, DE 19884	<u> </u>	
·	upation / Job title (See Instructions)	Employer (See Instructions	s)
Marketing F	Product Mgr II	Bank of America	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/15/2024	Worthington, Karen		\$25.00
	Contributor address; City; State; Zip Code		
.	WILMINGTON, DE 19884		Į
Principal occupation / Job title (See Instructions) Employer (See Instruction			S)
Marketing F	Product Mgr II	Bank of America	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 107/108 Rpt: 110/122	
2 FILER NAME Bank of America State and Federal PAC				Filer ID (Ethics Commission F 00080283	-ilers)
4 Date 07/15/2024			7 /	Amount of Contribution (\$)	\$25.00
	O FALLON, MO 63368				
8 Principal occu Business Co	upation / Job title (See Instructions) ontrol Mgr	9 Employer (See Instructions Bank of America	s)		
Date 07/31/2024	Zellers, Jacqueline Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
Principal occu Business Co	O FALLON, MO 63368 upation / Job title (See Instructions) ontrol Mgr	Employer (See Instructions Bank of America	 s)		
Date 08/15/2024			<i>P</i>	Amount of Contribution (\$)	\$25.00
Principal occu Business Co	O FALLON, MO 63368 upation / Job title (See Instructions) ontrol Mgr	Employer (See Instructions Bank of America	s)		
Date 08/31/2024	Full name of contributor out-of-state PAC (ID#:_ Zellers, Jacqueline Out-of-state PAC (ID#:_ Contributor address; City; State; Zip Code)	A	Amount of Contribution (\$)	\$25.00
Principal occu Business Co	O FALLON, MO 63368 upation / Job title (See Instructions) ontrol Mgr	Employer (See Instructions Bank of America	 S)		
Date 09/15/2024	Full name of contributor out-of-state PAC (ID#: Zellers, Jacqueline Contributor address; City; State; Zip Code O FALLON, MO 63368)	ŀ	Amount of Contribution (\$)	\$25.00
Principal occupation / Job title (See Instructions) Employer (See Instruction Business Control Mgr Bank of America			5)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 108/108 Rpt: 111/122 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Bank of America State and Federal PAC 00080283 4 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 7 09/30/2024 \$25.00 Zellers, Jacqueline 6 Contributor address; City; State; Zip Code O FALLON, MO 63368 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Business Control Mgr** Bank of America Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/15/2024 \$25.00 Zellers, Jacqueline Contributor address; City; State; Zip Code O FALLON, MO 63368 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Control Mgr** Bank of America

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

The Instruction Guide explains how to complete this form.			on Guide explains how to complete this form.	1	Total pages Schedule C4: Sch: 1/1 Rpt: 112/122
2 FILER NAME				3	Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC			a State and Federal PAC		00080283
4	Date	5	Corporation / Labor Organization name	6	Amount (\$)
	09/30/2024		Bank of America Corporation		1,364.00

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 1/9 Rpt: 113/122	Bank of America State and Federal PAC	00080283	
4 Date	5 Payee name		
10/09/2024	Angelia Orr For Texas House		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1,000.00	P.O. Box 113		
Expenditure from corporate funds	Itasca, TX 76055		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription	
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Support General 2024 State House 13 TX	
		Support General 2024 State House 13 TX	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held	
Date	Payee name		
10/09/2024	Angie Button Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	6914 Clear Springs Cir.		
Expenditure from corporate funds	Garland, TX 75044		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	crintion	
OF		Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense	
	То	Support General 2024 State House 112 TX	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held	
Date	Payee name		
10/16/2024	Ann Johnson Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	P.O. Box 56386		
Expenditure from corporate funds	Houston, TX 77256		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des		
OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Support General 2024 State House 134 TX	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 2/9 Rpt: 114/122	Bank of America State and Federal PAC 00080283		
4 Date	5 Payee name		
10/01/2024	Bryan Hughes Campaign		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$2,000.00	P.O. Box 450		
Expenditure from corporate funds	Minneola, TX 75773		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee To Support Primary 2026 State Senate 01 TX		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/01/2024	Charles Geren Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	P.O. Box 1440		
Expenditure from corporate funds	Ft. Worth, TX 76101		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 99 TX 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/16/2024	Charles Perry for State Senate		
Amount (\$)	Payee address; City; State; Zip Code		
\$2,000.00	P.O. Box 94806		
Expenditure from corporate funds	Lubbock, TX 79493		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support Primary 2026 State Senate 28 TX 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 3/9 Rpt: 115/122	Bank of America State and Federal PAC 00080283			
4 Date	5 Payee name			
10/09/2024	Christian Manuel Campaign			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	505 Orleans St.			
Expenditure from corporate funds	Beaumont, TX 77701			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/01/2024	Cmte to Re-Elect Judith Zaffirini			
Amount (\$)	Payee address; City; State; Zip Code			
\$2,000.00	1407 Washington Street			
Expenditure from corporate funds	Laredo, TX 78042			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support Primary 2026 State Senate 21 TX 			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/09/2024	David Spiller for Texas Campaign			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	PO Box 447			
Expenditure from corporate funds	Jacksboro, TX 76458			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 68 TX 			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 4/9 Rpt: 116/122	Bank of America State and Federal PAC 00080283		
4 Date	5 Payee name		
10/01/2024	Dr. Charles Schwertner for State Senate		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$2,000.00	P.O. Box 2448		
Expenditure from corporate funds	Georgetown, TX 78627		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/09/2024	Drew Darby Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	P.O. Box 3284		
Expenditure from corporate funds	San Angelo, TX 76902		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 72 TX 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/09/2024	Dustin Burrows Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	PO Box 6170		
Expenditure from corporate funds	Lubbock, TX 79493		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 83 TX 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 5/9 Rpt: 117/122	Bank of America State and Federal PAC 00080283			
4 Date	5 Payee name			
10/01/2024	Giovanni Capriglione for Texas			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,500.00	1352 Ten Bar Trail			
Expenditure from corporate funds	Southlake, TX 76092			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee To Support General 2024 State House 98 TX			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/01/2024	Hinojosa for State Senate			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,500.00	P.O. Box 1421			
Expenditure from corporate funds	Austin, TX 78767			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State Senate 20 TX 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/09/2024	Jared Patterson Campaign for State Representative			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	4412 Sapphire Drive			
Expenditure from corporate funds	Frisco, TX 75034			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 106 TX 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 6/9 Rpt: 118/122	Bank of America State and Federal PAC 00080283			
4 Date	5 Payee name			
10/09/2024	Jeff Leach for State House			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	P.O. Box 866186			
Expenditure from corporate funds	Plano, TX 75086			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee			
	To Support General 2024 State House 67 TX			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/01/2024	Jose Menendez Campaign			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,500.00	PO Box 100833			
Expenditure from corporate funds	San Antonio, TX 78201			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee To Support Primary 2026 State Senate 26 TX			
	TO Support Primary 2020 State Senate 20 TX			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/09/2024	Joseph Moody Campaign			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	PO Box 920827			
Expenditure from corporate funds	El Paso, TX 79902			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee			
	To Support General 2024 State House 78 TX			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 7/9 Rpt: 119/122	Bank of America State and Federal PAC 00080283		
4 Date	5 Payee name		
10/01/2024	Kelly Hancock for Texas Senate		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$2,000.00	4908 Dory Court		
Expenditure from corporate funds	North Richland Hills, TX 76180		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support Primary 2026 State Senate 09 TX 		
	To Support Filinary 2020 State Senate 09 TX		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/01/2024	Morgan LaMantia for State Senate		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,500.00	222 North Expressway 83 Suite 203		
Expenditure from corporate funds	Brownsville, TX 78526		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State Senate 27 TX 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/09/2024	Rafael Anchia Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	P.O. Box 4468		
Expenditure from corporate funds	Dallas, TX 75208		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 103 TX 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 8/9 Rpt: 120/122	Bank of America State and Federal PAC 00080283				
4 Date	5 Payee name				
10/01/2024	Royce West for State Senate				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$2,000.00					
Expenditure from corporate funds	Dallas, TX 75203				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee To Support General 2024 State Senate 23 TX				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
10/09/2024	Ryan Guillen Campaign				
Amount (\$)	Payee address; City; State; Zip Code				
\$1,000.00	2504 Sable Palm Drive				
Expenditure from corporate funds	Rio Grande City, TX 78582				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 31 TX 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
10/09/2024	Senfronia Thompson Campaign Cmte				
Amount (\$)	Payee address; City; State; Zip Code				
\$1,000.00	8611 Peachtree				
Expenditure from corporate funds	Houston, TX 77016				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 141 TX 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 9/9 Rpt: 121/122	Bank of America State and Federal PAC 00080283			
4 Date	5 Payee name			
10/01/2024	Tan Parker for Senate District 12			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,500.00	P.O. Box 271741			
Expenditure from corporate funds	Flower Mound, TX 75027			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/09/2024	Texans for Trent Ashby			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	P.O. Box 412			
Expenditure from corporate funds	Lufkin, TX 75902			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 9 TX 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/01/2024	Todd Hunter Campaign			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,500.00	445 Cape Henry			
Expenditure from corporate funds	Corpus Christi, TX 78412			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense To Support General 2024 State House 32 TX 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			

TEXT ANNOTATION

Sch: 1/1 Rpt: 122/122

FILER NAME	Filer ID (Ethics Commission Filers)
Bank of America State and Federal PAC	00080283

Schedule

Cover Sheet

Information entered by filer as a memo:

This balance may include other transactions not required to be reported per Ethics Advisory Opinion #208. Non-Texas and Federal disbursement during the reporting period total \$143,400.00.