

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

THOROUGHbred PAC

ADDRESS (number and street)

1634 I STREET, NW

SUITE 1200



Check if different than previously reported. (ACC)

WASHINGTON

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00425439

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the  
State of

M M M / D D D / Y Y Y Y Y Y

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the  
State of

M M M / D D D / Y Y Y Y Y Y

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

06

M M M / D D D / Y Y Y Y Y Y

01

M M M / D D D / Y Y Y Y Y Y

2021

through

M M M / D D D / Y Y Y Y Y Y

06

M M M / D D D / Y Y Y Y Y Y

30

M M M / D D D / Y Y Y Y Y Y

2021

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

Whitfield, Ed, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Whitfield, Ed, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

07

M M M / D D D / Y Y Y Y Y Y

20

M M M / D D D / Y Y Y Y Y Y

2021

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

Office  
Use  
Only

### FEC FORM 3X

Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

THOROUGHbred PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
06		01		2021

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2021</td></tr></table>	Y	Y	Y	Y	Y	2021						<table><tr><td colspan="5">1385755.63</td></tr></table>	1385755.63				
Y	Y	Y	Y	Y													
2021																	
1385755.63																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">1535079.94</td></tr></table>	1535079.94															
1535079.94																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">5195.67</td></tr></table>	5195.67					<table><tr><td colspan="5">219425.54</td></tr></table>	219425.54									
5195.67																	
219425.54																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">1540275.61</td></tr></table>	1540275.61					<table><tr><td colspan="5">1605181.17</td></tr></table>	1605181.17									
1540275.61																	
1605181.17																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">31051.84</td></tr></table>	31051.84					<table><tr><td colspan="5">95957.40</td></tr></table>	95957.40									
31051.84																	
95957.40																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">1509223.77</td></tr></table>	1509223.77					<table><tr><td colspan="5">1509223.77</td></tr></table>	1509223.77									
1509223.77																	
1509223.77																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



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

## For further information contact:

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

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

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

THOROUGHBRED PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	1		2	0	2	1		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	2	1		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	5195.67	219425.54
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5195.67	219425.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5195.67	219425.54

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1651.84	33057.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1651.84	33057.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	48000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4900.00	14900.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	31051.84	95957.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31051.84	95957.40

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	1651.84	33057.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	1651.84	33057.40

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

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

FOR LINE NUMBER: PAGE 6 OF 15  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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

NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

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

## **A. iShares S&P US Pref Stock Idx Fnd**

Mailing Address 400 Howard St.

City

San Francisco

State

CA

Zip Code

94105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1232.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 07 / 2021

Transaction ID : SA17.5267

Amount of Each Receipt this Period

254.26

☐ Memo Item

Dividend

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

## **B. National Rural Utilities Cooperative Finance Corporation**

Mailing Address 20701 Cooperative Way

City

Sterling

State

VA

Zip Code

20166

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

349.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 15 / 2021

Transaction ID : SA17.5268

Amount of Each Receipt this Period

58.33

☐ Memo Item

Interest

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

## **C. Pimco Municipal Income II**

Mailing Address 840 Newport Center Drive

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

1295.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2021

Transaction ID : SA17.5266

Amount of Each Receipt this Period

218.09

☐ Memo Item

Dividend

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

530.68

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 15

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

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

## **A. U.S. Treasury**

Mailing Address 1500 Pennsylvania Ave NW

City  
Washington

State  
DC

Zip Code  
20220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7187.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2021

**Transaction ID : SA17.5272**

Amount of Each Receipt this Period

3187.50

☐ Memo Item  
Interest

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

## **B. Vanguard 500 Index Fund**

Mailing Address PO Box 2600

City  
Valley Forge

State  
PA

Zip Code  
19482

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2021

**Transaction ID : SA17.5270**

Amount of Each Receipt this Period

759.93

☐ Memo Item  
Interest

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

## **C. Vanguard High Dividend Yield Index Fund**

Mailing Address PO Box 2600

City  
Valley Forge

State  
PA

Zip Code  
19482

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1096.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2021

**Transaction ID : SA17.5269**

Amount of Each Receipt this Period

587.30

☐ Memo Item  
Dividend

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

4534.73

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

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

FOR LINE NUMBER: PAGE 8 OF 15  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

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

## **A. Vanguard LifeStrategy Income**

Mailing Address PO Box 2600

City

Valley Forge

State

PA

Zip Code

19482

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

233.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2021

Transaction ID : SA17.5271

Amount of Each Receipt this Period

128.58

☐ Memo Item  
Interest

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

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

128.58

5193.99



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

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

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo Business Card**

Mailing Address PO Box 77033

City  
MinneapolisState  
MNZip Code  
55480Purpose of Disbursement  
Credit Card Payment, See Memo

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	5			2	0	2	1		

FEC Identification Number

**C****Transaction ID : SB21B.5310**

Amount of Each Disbursement this Period

1651.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Williamsburg Inn**

Mailing Address PO Box 1776

City  
WilliamsburgState  
VAZip Code  
23187Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	1		

FEC Identification Number

**C****Transaction ID : SB21B.5310.C**

Amount of Each Disbursement this Period

1651.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1651.84

1651.84

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 15

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

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

Full Name (Last, First, Middle Initial)

**A. BOOZMAN FOR ARKANSAS**

Mailing Address PO BOX 671

City  
ROGERSState  
ARZip Code  
72757

Purpose of Disbursement

Candidate Name

**BOOZMAN, SEN. JOHN, , ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: AR

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	2	1		

FEC Identification Number

**C** C00476317**Transaction ID : SB23.5274**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CLIFF BENTZ FOR CONGRESS**

Mailing Address 660 MORGAN AVE

City  
ONTARIOState  
ORZip Code  
97914

Purpose of Disbursement

Candidate Name

**BENTZ, CLIFF, , ,**

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: OR

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	2	1		

FEC Identification Number

**C** C00725465**Transaction ID : SB23.5303**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JOHN THUNE**

Mailing Address PO BOX 841

City  
SIOUX FALLSState  
SDZip Code  
57101

Purpose of Disbursement

Candidate Name

**THUNE, JOHN R., , ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: SD

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	2	1		

FEC Identification Number

**C** C00409581**Transaction ID : SB23.5287**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

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

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF TODD YOUNG, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2021

Mailing Address PO BOX 3743

City  
CARMELState  
INZip Code  
46082

Purpose of Disbursement

FEC Identification Number

**C** C00459255**Transaction ID : SB23.5290**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Candidate Name

**YOUNG, TODD CHRISTOPHER, , ,**Category/  
Type

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: IN

District: 00

Full Name (Last, First, Middle Initial)

**B. HOEVEN FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2021

Mailing Address PO BOX 861

City  
BISMARCKState  
NDZip Code  
58502

Purpose of Disbursement

FEC Identification Number

**C** C00473371**Transaction ID : SB23.5278**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Candidate Name

**HOEVEN, JOHN, , ,**Category/  
Type

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: ND

District: 00

Full Name (Last, First, Middle Initial)

**C. MIKE CRAPO FOR US SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2021

Mailing Address PO BOX 1948

City  
BOISEState  
IDZip Code  
83701

Purpose of Disbursement

FEC Identification Number

**C** C00330886**Transaction ID : SB23.5277**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Candidate Name

**CRAPO, MICHAEL D, , ,**Category/  
Type

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: ID

District: 00

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

6000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

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

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

Full Name (Last, First, Middle Initial)

**A. NANCY MACE FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Mailing Address 295 SEVEN FARMS DRIVE  
SUITE C-186City  
CHARLESTONState  
SCZip Code  
29492

Purpose of Disbursement

FEC Identification Number

**C** C00710103**Transaction ID : SB23.5307**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Candidate Name

**MACE, NANCY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: SC

District: 01

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. RAND PAUL FOR US SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2021

Mailing Address PO BOX 72928

City  
NEWPORTState  
KYZip Code  
41072

Purpose of Disbursement

FEC Identification Number

**C** C00496075**Transaction ID : SB23.5284**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Candidate Name

**PAUL, RAND, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY

District: 00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. RON JOHNSON FOR SENATE INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2021

Mailing Address C/O RED CURVE SOLUTIONS, LLC  
138 CONANT STREET, 2ND FLOORCity  
BEVERLYState  
MAZip Code  
01915

Purpose of Disbursement

FEC Identification Number

**C** C00482984**Transaction ID : SB23.5281**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Candidate Name

**JOHNSON, RONALD HAROLD, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI

District: 00

Category/  
Type**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

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

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

Full Name (Last, First, Middle Initial)

**A. SCALISE FOR CONGRESS**

Mailing Address PO BOX 23219

City  
JEFFERSONState  
LAZip Code  
70183

Purpose of Disbursement

Candidate Name

**SCALISE, STEVE MR, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	2	1		

FEC Identification Number

**C** C00394957**Transaction ID : SB23.5306**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SIMPSON FOR CONGRESS**

Mailing Address 1487 PARKWAY DRIVE

City  
BLACKFOOTState  
IDZip Code  
83221

Purpose of Disbursement

Candidate Name

**SIMPSON, MICHAEL, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: ID

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	2	1		

FEC Identification Number

**C** C00331397**Transaction ID : SB23.5313**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED DEUTCH FOR CONGRESS COMMITTEE**

Mailing Address 910 17TH ST NW STE 925

City  
WASHINGTONState  
DCZip Code  
20006

Purpose of Disbursement

Candidate Name

**DEUTCH, THEODORE ELIOT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL

District: 22

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	3			2	0	2	1		

FEC Identification Number

**C** C00469163**Transaction ID : SB23.5293**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5500.00

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

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

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

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

Full Name (Last, First, Middle Initial)

**A. TUBERVILLE FOR SENATE, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

Mailing Address PO BOX 590012

City  
BIRMINGHAMState  
ALZip Code  
35259

Purpose of Disbursement

FEC Identification Number

C C00701672

**Transaction ID : SB23.5302**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Candidate Name

**TUBERVILLE, THOMAS H, , ,**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL

District: 00

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

2000.00

24500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

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

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NAME OF COMMITTEE (In Full)

**THOROUGHbred PAC**

Full Name (Last, First, Middle Initial)

**A. Mount Vernon Ladies Association**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Mailing Address 3200 Mount Vernon Memorial Highway

City  
Mount VernonState  
VAZip Code  
22121Purpose of Disbursement  
Charitable Contribution

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB29.5297**

Amount of Each Disbursement this Period

1900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Order of St. John**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Mailing Address 1850 M Street NW, Suite 1070

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Charitable Contribution

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB29.5292**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4900.00

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

4900.00