

# 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**  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

ADDRESS (number and street) **PO Box 26141**  
 Check if different than previously reported. (ACC) **Alexandria VA 22313**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00632323** 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2023 through  /  /  2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Marston, Chris, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Marston, Chris, , , [Electronically Filed] Date  /  /  2023

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Defend Our Conservative Senate PAC (DOC'S PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>		98429.05
(b) Cash on Hand at Beginning of Reporting Period.....	98429.05	
(c) Total Receipts (from Line 19) .....	164000.00	164000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	262429.05	262429.05
7. Total Disbursements (from Line 31).....	84021.21	84021.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	178407.84	178407.84
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

**Defend Our Conservative Senate PAC (DOC'S PAC)**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2023 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2023

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).....	37000.00	37000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	37000.00	37000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	127000.00	127000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	164000.00	164000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	164000.00	164000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	164000.00	164000.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	34021.21	34021.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	34021.21	34021.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40000.00	40000.00
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).....	5000.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	5000.00	5000.00
29. Other Disbursements (Including Non-Federal Donations).....	5000.00	5000.00
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)) ..	84021.21	84021.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	84021.21	84021.21

**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) .....	164000.00	164000.00
34. Total Contribution Refunds (from Line 28(d)) .....	5000.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	159000.00	159000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	34021.21	34021.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	34021.21	34021.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. BAKER, BRETT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3424 S WAKEFIELD STREET  
 City ARLINGTON State VA Zip Code 22206-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE NICKLES GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 28 / 2023  
**Transaction ID : SA11A.58079**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**B. BRADWAY, COURTNEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 I STREET SOUTHEAST APT 1104  
 City WASHINGTON State DC Zip Code 20003-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CORNERSTONE GOVERNMENT AFFAIRS Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11A.58089**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**C. BUCKALEW, ADAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 227 12TH STREET NORTHEAST  
 City WASHINGTON State DC Zip Code 20002-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALB SOLUTIONS Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11A.58086**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. GILLOTT, CHRIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 EAST MAPLE STREET  
 City ALEXANDRIA State VA Zip Code 22301-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INVARIANT Occupation (for Individual) GOVERNMENT AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11A.58084**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**B. HALL, HUNTER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 302 4TH STREET SOUTHEAST  
 City WASHINGTON State DC Zip Code 20003-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE PICARD GROUP Occupation (for Individual) LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 16 / 2023  
**Transaction ID : SA11A.58091**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**C. LUCAS, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 K STREET SOUTHEAST  
 City WASHINGTON State DC Zip Code 20003-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 16 / 2023  
**Transaction ID : SA11A.58090**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. MARSHALL, MEGAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 126 QUEEN STREET  
 SUITE 290 NORTH  
 City ALEXANDRIA State VA Zip Code 22314-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NATHANSON+HAUCK Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 26 / 2023**  
**Transaction ID : SA11A.58080**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
**CONTRIBUTION**

**B. MARTIN, MARGARET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1241 G STREET NORTHEAST  
 City WASHINGTON State DC Zip Code 20002-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 21 / 2023**  
**Transaction ID : SA11A.58083**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
**CONTRIBUTION**

**C. NORTHRUP, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4705 ASHFIELD ROAD  
 City BETHESDA State MD Zip Code 20816-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RAMPY NORTHRUP LLC Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 30 / 2023**  
**Transaction ID : SA11A.58077**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 44
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. PRICE, DARED, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 MAIN ST.

City WINFIELD	State KS	Zip Code 67156-
------------------	-------------	--------------------

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

Name of Employer (for Individual) GRAVES DRUG	Occupation (for Individual) PHARMACIST
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2023

**Transaction ID : SA11A.58078**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. ROSEN, DEAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 240 KENTUCKY AVENUE SOUTHEAST

City WASHINGTON	State DC	Zip Code 20003-
--------------------	-------------	--------------------

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

Name of Employer (for Individual) MEHLMAN CONSULTING	Occupation (for Individual) GOVERNMENT RELATIONS
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2023

**Transaction ID : SA11A.58088**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C. SUTTER, BRIAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 N. QUAKER LANE

City ALEXANDRIA	State VA	Zip Code 22304-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAPITOL HILL CONSULTING GROUP	Occupation (for Individual) SENIOR VP
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2023

**Transaction ID : SA11A.58081**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. TWOMEY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 729 10TH STREET NE  
 City WASHINGTON State DC Zip Code 20002-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TIBER CREEK GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11A.58087**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**B. VAN PELT, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 450 Q STREET NORTHWEST B  
 City WASHINGTON State DC Zip Code 20001-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CROSSROADS STRATEGIES Occupation (for Individual) LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 30 / 2023  
**Transaction ID : SA11A.58075**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**C. VERDERY, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3628 DAVIS STREET NW  
 City WASHINGTON State DC Zip Code 20007-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MONUMENT ADVOCACY Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 30 / 2023  
**Transaction ID : SA11A.58076**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. WALTON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6512 ENGEL DR  
 City MCLEAN State VA Zip Code 22101-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BGR GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 23 / 2023  
**Transaction ID : SA11A.58082**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**B. WHITE, DERRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1015 19TH STREET SOUTH  
 City ARLINGTON State VA Zip Code 22202-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FORBES TATE PARTNERS Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11A.58085**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**C. WILLIS, PATRICIA, JO, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 901 APOLLO ST  
 City LIBERAL State KS Zip Code 67901-5520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 19 / 2023  
**Transaction ID : SA11A.55888**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 44  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**WILLIS, THOMAS, MCKAY, ,**

Mailing Address 901 APOLLO ST

City LIBERAL    State KS    Zip Code 67901-5520

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

Name of Employer (for Individual) CONESTOGA ENERGY PARTNERS    Occupation (for Individual) CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2023

**Transaction ID : SA11A.55887**

Amount of Each Receipt this Period  
 5000.00

Memo Item  
 CONTRIBUTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ZUMWALT, BRYAN, , ,**

Mailing Address 4109 18TH ST. N

City ARLINGTON    State VA    Zip Code 22207-3055

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

Name of Employer (for Individual) FTI CONSULTING    Occupation (for Individual) SENIOR MANAGING DIRECTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 03 / 2023

**Transaction ID : SA11A.54485**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 CONTRIBUTION

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	37000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. ABBVIE POLITICAL ACTION COMMITTEE**

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

Mailing Address 1 N. WAUKEGAN ROAD

City NORTH CHICAGO	State IL	Zip Code 60064-1802
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00536573

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2023

**Transaction ID : SA11C.55909**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. AIR LINE PILOTS ASSOCIATION INTERNATIONAL PAC**

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

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON	State DC	Zip Code 20036-2212
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035451

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2023

**Transaction ID : SA11C.54593**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTI**

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

Mailing Address 25 MASSACHUSETTS AVENUE, NW, SUITE

City WASHINGTON	State DC	Zip Code 20001-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00413955

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2023

**Transaction ID : SA11C.54596**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1445 NEW YORK AVENUE NW  
STE 800

City WASHINGTON State DC Zip Code 20005-2125

FEC ID number of contributing federal political committee. **C** C00359539

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2023

**Transaction ID : SA11C.54627**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 101 NORTH 3RD STREET

City MOORHEAD State MN Zip Code 56560-1952

FEC ID number of contributing federal political committee. **C** C00110338

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2023

**Transaction ID : SA11C.54484**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. AMERICAN COLLEGE OF CARDIOLOGY PAC (HEARTPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2400 N ST NW

City WASHINGTON State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee. **C** C00375360

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2023

**Transaction ID : SA11C.54566**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address 101 NORTH 3RD STREET

City MOORHEAD	State MN	Zip Code 56560-1952
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00110338

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03		31		2023

**Transaction ID : SA11C.54630**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. AMERICAN CAR RENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

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

Mailing Address P.O. BOX 584

City LONG LAKE	State NY	Zip Code 12847-0584
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00612010

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03		31		2023

**Transaction ID : SA11C.54660**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

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

Mailing Address 1111 14TH STREET, NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005-5627
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000729

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04		13		2023

**Transaction ID : SA11C.54666**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 44  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 800 TENTH STREET, NW  
TWO CITYCENTER, SUITE 400

City WASHINGTON State DC Zip Code 20001-5189

FEC ID number of contributing federal political committee. **C** C00106146

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 03 / 16 / 2023  
**Transaction ID : SA11C.54549**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AMERICAN HOTEL AND LODGING ASSOCIATION POLITICAL ACTION COMM**

Mailing Address 1250 I STREET, NW #1100

City WASHINGTON State DC Zip Code 20005-5904

FEC ID number of contributing federal political committee. **C** C00001198

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 23 / 2023  
**Transaction ID : SA11C.58025**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 25 MASSACHUSETTS AVE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C** C00000422

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 03 / 03 / 2023  
**Transaction ID : SA11C.54483**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. AMERICAN RENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1900 19TH STREET

City MOLINE	State IL	Zip Code 61265-4179
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00107615

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	17	/	2023

**Transaction ID : SA11C.55711**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMI**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG	State IL	Zip Code 60173-4973
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00255752

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2023

**Transaction ID : SA11C.54572**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. AMGEN INC. POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 601 13TH STREET, NW  
SUITE 1100 NORTH

City WASHINGTON	State DC	Zip Code 20005-3822
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00251876

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2023

**Transaction ID : SA11C.54499**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. BASF CORPORATION EMPLOYEES PAC**

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

Mailing Address 100 PARK AVENUE

City FLORHAM PARK	State NJ	Zip Code 07932-1049
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00340075

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

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

**Transaction ID : SA11C.58064**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. CALIFORNIA DAIRIES, INC. FEDERAL POLITICAL ACTION COMMITTEE**

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

Mailing Address 1127-11TH STREET, SUITE 210

City SACRAMENTO	State CA	Zip Code 95814-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00349746

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

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2023

**Transaction ID : SA11C.54632**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. CORECIVIC, INC. POLITICAL ACTION COMMITTEE (CORECIVIC PAC)**

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

Mailing Address 10 BURTON HILLS BOULEVARD

City NASHVILLE	State TN	Zip Code 37215-9922
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00366468

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

**Transaction ID : SA11C.58065**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address 975 F STREET, NW SUITE 300

City WASHINGTON	State DC	Zip Code 20004-1459
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00477653

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2023

**Transaction ID : SA11C.55761**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DAVITA INC. POLITICAL ACTION COMMITTEE (DAPAC)**

Mailing Address 32275 32ND AVE, S.

City FEDERAL WAY	State WA	Zip Code 98001-9616
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00340943

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2023

**Transaction ID : SA11C.54552**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042-4511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00088591

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2023

**Transaction ID : SA11C.54487**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. GROWTH ENERGY PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 701 8TH ST NW SUITE 450

City WASHINGTON	State DC	Zip Code 20001-3937
FEC ID number of contributing federal political committee. <b>C</b> C00475665		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2023  
**Transaction ID : SA11C.54481**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLI**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON	State DC	Zip Code 20001-6707
FEC ID number of contributing federal political committee. <b>C</b> C00022343		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2023  
**Transaction ID : SA11C.54548**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MER**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 601 PENNSYLVANIA AVE., NW  
NORTH BUILDING, SUITE 1200

City WASHINGTON	State DC	Zip Code 20004-2601
FEC ID number of contributing federal political committee. <b>C</b> C00097485		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2023  
**Transaction ID : SA11C.58067**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1600 DUKE STREET

City ALEXANDRIA	State VA	Zip Code 22314-3466
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00126763

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2023

**Transaction ID : SA11C.54426**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON	State DC	Zip Code 20005-4171
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00238725

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2023

**Transaction ID : SA11C.54565**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON	State DC	Zip Code 20005-4171
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00238725

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2023

**Transaction ID : SA11C.54589**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 OF 44  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NATIONAL ASSOCIATION OF LETTER CARRIERS OF U.S.A. POLITICAL**

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001-2144

FEC ID number of contributing federal political committee. **C** C00023580

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2023

**Transaction ID : SA11C.58066**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMM**

Mailing Address 1101 KING STREET  
SUITE 600

City ALEXANDRIA State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2023

**Transaction ID : SA11C.54482**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314-3391

FEC ID number of contributing federal political committee. **C** C00030809

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2023

**Transaction ID : SA11C.54628**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE / AME**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4950 W ROYAL LANE

City IRVING	State TX	Zip Code 75063-2524
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00140061

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2023

**Transaction ID : SA11C.54547**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B. NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3 BETHESDA METRO CENTER SUITE 1100

City BETHESDA	State MD	Zip Code 20814-6302
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00113811

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2023

**Transaction ID : SA11C.54594**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1201 PENNSYLVANIA AVENUE, NW 12TH FLOOR

City WASHINGTON	State DC	Zip Code 20004-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00113811

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2023

**Transaction ID : SA11C.58070**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. NATIONAL FEDERATION OF INDEPENDENT BUSINESS FEDERAL POLITICA**

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

Mailing Address 555 12TH ST NW  
SUITE 1001

City WASHINGTON State DC Zip Code 20004-1267

FEC ID number of contributing federal political committee. **C** C00101105

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2023

**Transaction ID : SA11C.54551**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. NATIONAL GROCERS ASSOCIATION GROCERS PAC**

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

Mailing Address 601 PENNSYLVANIA AVE NW  
SUITE 375N

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00508770

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2023

**Transaction ID : SA11C.58068**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. NATIONAL TURKEY FEDERATION POLITICAL ACTION COMMITTEE/TURPAC**

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

Mailing Address 1225 NEW YORK AVE NW  
STE 400

City WASHINGTON State DC Zip Code 20005-6404

FEC ID number of contributing federal political committee. **C** C00076182

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2023

**Transaction ID : SA11C.54629**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. NOVO NORDISK INC. PAC (NOVO NORDISK PAC)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 MASSACHUSETTS AVE, NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001-4598

FEC ID number of contributing federal political committee. **C** C00424838

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2023

**Transaction ID : SA11C.54595**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA BETTER GO**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 950 F STREET, NW  
SUITE 300

City WASHINGTON State DC Zip Code 20004-1440

FEC ID number of contributing federal political committee. **C** C00021972

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2023

**Transaction ID : SA11C.55754**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF OR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 317 MASSACHUSETTS AVE., N.E.  
1ST FLOOR

City WASHINGTON State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2023

**Transaction ID : SA11C.54597**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. THE FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE**

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

Mailing Address 50 F STREET NW  
SUITE 900

City WASHINGTON State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2023

**Transaction ID : SA11C.55762**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

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

Mailing Address 1155 F STREET, NW  
SUITE 400

City WASHINGTON State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C** C00284885

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2023

**Transaction ID : SA11C.54550**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. TRANSCANADA USA SERVICES, INC. PAC (TC PAC)**

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

Mailing Address 1250 I STREET NW  
SUITE 225

City WASHINGTON State DC Zip Code 20005-5977

FEC ID number of contributing federal political committee. **C** C00525055

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2023

**Transaction ID : SA11C.54488**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. TRANSCANADA USA SERVICES, INC. PAC (TC PAC)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 I STREET NW  
SUITE 225

City WASHINGTON State DC Zip Code 20005-5977

FEC ID number of contributing federal political committee. **C** C00525055

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2023

**Transaction ID : SA11C.58069**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. WALMART STORES, INC. PAC FOR RESPONSIBLE GOVERNMENT**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2023

**Transaction ID : SA11C.54631**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FARGO EMPLOY**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 550 S 4TH STREET, FLOOR 10  
MAC N9310-10E

City MINNEAPOLIS State MN Zip Code 55415-1529

FEC ID number of contributing federal political committee. **C** C00034595

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2023

**Transaction ID : SA11C.55889**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 28 OF 44  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTI**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2023

**Transaction ID : SA11C.54486**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
**CONTRIBUTION**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	127000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. ROBERTSON, BRENT, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 09 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I1898

Amount of Each Disbursement this Period: 100.00

Memo Item

**B. ROBERTSON, BRENT, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 23 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I1899

Amount of Each Disbursement this Period: 400.00

Memo Item

**C. ROBERTSON, BRENT, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I1899

Amount of Each Disbursement this Period: 3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial)

**A. ROBERTSON, BRENT, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		02		2023

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1902**  
 Amount of Each Disbursement this Period  
 [ ] 170.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ROBERTSON, BRENT, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2023

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I19042**  
 Amount of Each Disbursement this Period  
 [ ] 3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ROBERTSON, BRENT, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2023

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1908**  
 Amount of Each Disbursement this Period  
 [ ] 200.00

Memo Item

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

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

[ ] 3370.00  
 [ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial)

**A. ROBERTSON, BRENT, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	3

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.I1908**  
Amount of Each Disbursement this Period  
[Redacted] 3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ROBERTSON, BRENT, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	3

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.I1919**  
Amount of Each Disbursement this Period  
[Redacted] 3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ROBERTSON, BRENT, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	2	3

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.I1924**  
Amount of Each Disbursement this Period  
[Redacted] 3000.00

Memo Item

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

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

[Redacted]	9000.00
[Redacted]	[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A. ROBERTSON, BRENT, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 31 / 2023

Mailing Address: 314 INDEPENDENCE AVE SE  
LOWER SUITE

City: WASHINGTON State: DC Zip Code: 20003

Purpose of Disbursement: REIMBURSEMENT (SEE BELOW)

Candidate Name:

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.I1926  
Amount of Each Disbursement this Period: 1100.50

Memo Item

**B. WASHINGTON NATIONALS**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 31 / 2023

Mailing Address: 1500 SOUTH CAPITOL STREET SOUTHEAS

City: WASHINGTON State: DC Zip Code: 20003

Purpose of Disbursement: EVENT TICKETS

Candidate Name:

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.I1926  
Amount of Each Disbursement this Period: 1100.50

Memo Item

**C. ROBERTSON, BRENT, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 06 / 27 / 2023

Mailing Address: 314 INDEPENDENCE AVE SE  
LOWER SUITE

City: WASHINGTON State: DC Zip Code: 20003

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name:

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.I2027  
Amount of Each Disbursement this Period: 3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4100.50

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial)

### A. ANEDOT

Mailing Address 1920 MCKINNEY AVENUE

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
CC PROCESSING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2023

FEC Identification Number

C

Transaction ID : SB21B.I2025  
Amount of Each Disbursement this Period

1025.10

Memo Item

Full Name (Last, First, Middle Initial)

### B. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2023

FEC Identification Number

C

Transaction ID : SB21B.I19036  
Amount of Each Disbursement this Period

720.20

Memo Item

Full Name (Last, First, Middle Initial)

### C. CMDI

Mailing Address 1593 SPRING HILL RD

City VIENNA State VA Zip Code 22182

Purpose of Disbursement  
DATABASE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2023

FEC Identification Number

C

Transaction ID : SB21B.I1890  
Amount of Each Disbursement this Period

250.00

Memo Item

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

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

1995.30

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD

City VIENNA

State VA

Zip Code 22182

Purpose of Disbursement DATABASE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1898f

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD

City VIENNA

State VA

Zip Code 22182

Purpose of Disbursement DATABASE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I19073

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL RD

City VIENNA

State VA

Zip Code 22182

Purpose of Disbursement DATABASE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1918

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

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

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

[REDACTED] 750.00

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial)

### A. CMDI

Mailing Address 1593 SPRING HILL RD

City  
VIENNA

State  
VA

Zip Code  
22182

Purpose of Disbursement  
DATABASE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I19214

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. CMDI

Mailing Address 1593 SPRING HILL RD

City  
VIENNA

State  
VA

Zip Code  
22182

Purpose of Disbursement  
DATABASE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I20253

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. DOC SHOP, LLC

Mailing Address 14736 BELL TOWER ROAD

City  
WOODBIDGE

State  
VA

Zip Code  
22193

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1898

Amount of Each Disbursement this Period

[REDACTED] 1750.00

Memo Item

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

[REDACTED] 2250.00

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial)

### A. ELECTION CFO

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2023

FEC Identification Number

C  
Transaction ID : SB21B.I1897  
Amount of Each Disbursement this Period  
252.88

Memo Item

Full Name (Last, First, Middle Initial)

### B. ELECTION CFO

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 09 / 2023

FEC Identification Number

C  
Transaction ID : SB21B.I1898  
Amount of Each Disbursement this Period  
269.20

Memo Item

Full Name (Last, First, Middle Initial)

### C. ELECTION CFO

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 07 / 2023

FEC Identification Number

C  
Transaction ID : SB21B.I1904  
Amount of Each Disbursement this Period  
264.00

Memo Item

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

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

786.08

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial)

**A. ELECTION CFO**

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2023

FEC Identification Number

C  
Transaction ID : SB21B.I1909  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ELECTION CFO**

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2023

FEC Identification Number

C  
Transaction ID : SB21B.I19197  
Amount of Each Disbursement this Period  
328.42

Memo Item

Full Name (Last, First, Middle Initial)

**C. ELECTION CFO**

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2023

FEC Identification Number

C  
Transaction ID : SB21B.I1925  
Amount of Each Disbursement this Period  
250.00

Memo Item

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

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

828.42

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial)

**A. LINCOLN'S WAFFLE SHOP**

Mailing Address 504 10TH STREET NORTHWEST

City  
WASHINGTON

State  
DC

Zip Code  
20004

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1903:**  
Amount of Each Disbursement this Period

[REDACTED] 320.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. MAPLE RANCH PROPERTIES LLC**

Mailing Address 13799 NORTHWEST COUNTY ROAD 2

City  
AMORET

State  
MO

Zip Code  
64722

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1905:**  
Amount of Each Disbursement this Period

[REDACTED] 947.02

Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST**

Mailing Address 2702 LOVE FIELD DR.

City  
DALLAS

State  
TX

Zip Code  
75235

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1903:**  
Amount of Each Disbursement this Period

[REDACTED] 959.97

Memo Item

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

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

[REDACTED] 2227.30

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial) <b>A. THE BREAKERS HOTEL</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2023
Mailing Address 1 SOUTH COUNTY ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1902!</b> Amount of Each Disbursement this Period 1455.00
City PALM BEACH	State FL	Zip Code 33480
Purpose of Disbursement TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. THE BREAKERS HOTEL</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2023
Mailing Address 1 SOUTH COUNTY ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1903!</b> Amount of Each Disbursement this Period 3124.16
City PALM BEACH	State FL	Zip Code 33480
Purpose of Disbursement TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. KANSAS FEDERATION OF REPUBLICAN WOMEN</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2023
Mailing Address 1917 THORNTON STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1902</b> Amount of Each Disbursement this Period 500.00
City LEAVENWORTH	State KS	Zip Code 66048
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5079.16
<b>TOTAL</b> This Period (last page this line number only).....▶	33886.76

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial) <b>A. BANKS FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2023
Mailing Address PO BOX 11431		FEC Identification Number C00577999 <b>Transaction ID : SB23.I20255</b> Amount of Each Disbursement this Period 5000.00
City FORT WAYNE	State IN	Zip Code 46858-1431
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name <b>BANKS, JAMES, E., HON.,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IN	District:	PRIMARY

Full Name (Last, First, Middle Initial) <b>B. CRAMER FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2023
Mailing Address PO BOX 396		FEC Identification Number C00504704 <b>Transaction ID : SB23.I18972</b> Amount of Each Disbursement this Period 5000.00
City BISMARCK	State ND	Zip Code 58502-0396
Purpose of Disbursement		Category/ Type
Candidate Name <b>CRAMER, KEVIN, , MR.,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ND	District:	PRIMARY

Full Name (Last, First, Middle Initial) <b>C. DEB FISCHER FOR US SENATE</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2023
Mailing Address 5555 SOUTH ST, STE. 200		FEC Identification Number C00498907 <b>Transaction ID : SB23.I18973</b> Amount of Each Disbursement this Period 5000.00
City LINCOLN	State NE	Zip Code 68506
Purpose of Disbursement		Category/ Type
Candidate Name <b>FISCHER, DEBRA, S., ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE	District:	PRIMARY

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF NEAL DUNN</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2023
Mailing Address PO BOX 16088		FEC Identification Number C C00582304 <b>Transaction ID : SB23.I18995</b>
City PANAMA CITY	State FL	Zip Code 32406
Purpose of Disbursement 9/8/22 CHECK VOIDED		Amount of Each Disbursement this Period - 1000.00
Candidate Name <b>DUNN, NEAL, PATRICK, , MD</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 02	

Full Name (Last, First, Middle Initial) <b>B. JIM JUSTICE FOR U.S. SENATE</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2023
Mailing Address 3501 MACCORKLE AVE SE NUM 131		FEC Identification Number C C00839100 <b>Transaction ID : SB23.I20254</b>
City CHARLESTON	State WV	Zip Code 25304
Purpose of Disbursement CONTRIBUTION (P2024)		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>JUSTICE, JAMES, CONLEY, , II</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: WV	District:	PRIMARY

Full Name (Last, First, Middle Initial) <b>C. PETE RICKETTS FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2023
Mailing Address 1327 H STREET STE 101		FEC Identification Number C C00832436 <b>Transaction ID : SB23.I18974</b>
City LINCOLN	State NE	Zip Code 68508
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>RICKETTS, PETE, , ,</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE	District:	PRIMARY

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

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

9000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

Full Name (Last, First, Middle Initial) <b>A. WICKER FOR SENATE</b>			Date of Disbursement MM / DD / YYYY 02 / 06 / 2023	
Mailing Address PO BOX 64			FEC Identification Number C 000443218 <b>Transaction ID : SB23.I18971</b> Amount of Each Disbursement this Period 5000.00	
City JACKSON	State MS	Zip Code 39205-0064	Memo Item <input type="checkbox"/>	
Purpose of Disbursement			Category/Type	
Candidate Name <b>WICKER, ROGER, SEN.,</b>			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2024		Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ PRIMARY		
State: MS	District:			

Full Name (Last, First, Middle Initial) <b>B. KANSANS FOR LIFE FEDERAL POLITICAL ACTION COMMITTEE</b>			Date of Disbursement MM / DD / YYYY 02 / 03 / 2023	
Mailing Address 4016 FRIAR LANE ST P.O. BOX 4749 ST 2			FEC Identification Number C 000175521 <b>Transaction ID : SB23.I19027</b> Amount of Each Disbursement this Period 1000.00	
City WICHITA	State KS	Zip Code 67204	Memo Item <input type="checkbox"/>	
Purpose of Disbursement CONTRIBUTION			Category/Type	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 023		Disbursement For: 023 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. NRSC</b>			Date of Disbursement MM / DD / YYYY 02 / 06 / 2023	
Mailing Address 425 2ND STREET NE			FEC Identification Number C 000027466 <b>Transaction ID : SB23.I18975</b> Amount of Each Disbursement this Period 10000.00	
City WASHINGTON	State DC	Zip Code 20002	Memo Item <input type="checkbox"/>	
Purpose of Disbursement			Category/Type	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	16000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	40000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE / AMERICAN COLLEGE OF EMERGENCY PHYSICIANS

Date of Disbursement: MM / DD / YYYY  
02 / 17 / 2023

Mailing Address 4950 W ROYAL LANE

City IRVING State TX Zip Code 75038

Purpose of Disbursement REFUND OF EXCESSIVE CONTRIBUTION 12/28/2020

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 020  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C C00140061  
Transaction ID : SB28C.I1898!  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

**C.** Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

