

# 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**  
**OLD BREED PAC**

ADDRESS (number and street) **PO BOX 183**  
 Check if different than previously reported. (ACC) **HUDSON WI 54016**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00819425** 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.  
Type or Print Name of Treasurer **DATWYLER, THOMAS, , ,**

Signature of Treasurer **DATWYLER, THOMAS, , ,** [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

**OLD BREED 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"/>		<input type="text" value="2438.71"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2438.71"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="42782.80"/>	<input type="text" value="42782.80"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="45221.51"/>	<input type="text" value="45221.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8212.05"/>	<input type="text" value="8212.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37009.46"/>	<input type="text" value="37009.46"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

OLD BREED PAC

Report Covering the Period: From: 01 / 01 / 2023 To: 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).....	10000.00	10000.00
(ii) Unitemized .....	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10100.00	10100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10100.00	10100.00
12. Transfers From Affiliated/Other Party Committees.....	32682.80	32682.80
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)).....▶	42782.80	42782.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	42782.80	42782.80

**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 .....	7212.05	7212.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7212.05	7212.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1000.00	1000.00
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)) ..	8212.05	8212.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8212.05	8212.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

<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) .....	10100.00	10100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10100.00	10100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7212.05	7212.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7212.05	7212.05

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 OF 17
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**OLD BREED PAC**

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

Mailing Address **575 EASTVIEW WAY**

City <b>WOODSIDE</b>	State <b>CA</b>	Zip Code <b>94062-4009</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>CLOS DE LA TECH</b>	Occupation (for Individual) <b>WINEMAKER</b>
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**10000.00**

Date of Receipt  
**06 / 17 / 2023**

**Transaction ID : A0C28A74E3A3445CAB55**

Amount of Each Receipt this Period  
**10000.00**

Memo Item

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

Mailing Address

City	State	Zip Code
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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

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

Amount of Each Receipt this Period

Memo Item

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

**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 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**OLD BREED PAC**

**A. MCCORMICK VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 183

City HUDSON	State WI	Zip Code 54016
FEC ID number of contributing federal political committee. <b>C</b> C00828202		
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 ▼ 6528.00

Date of Receipt  
MM / DD / YYYY  
03 / 29 / 2023  
**Transaction ID : AED4E7F2ECBB9476DA07**

Amount of Each Receipt this Period  
6528.00

Memo Item  
**TRANSFER FROM AUTHORIZED COMMITTEE**

**B. HAMILTON, ANNE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4474 WHITESTONE WAY

City SUWANEE	State GA	Zip Code 30024-7593
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) THORNBRIAR CAPITAL LLC		Occupation (for Individual) BUSINESS OWNER
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  
02 / 14 / 2023  
**Transaction ID : AEFC116D856DC405A994**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. HAMILTON, DAVID, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4474 WHITESTONE WAY

City SUWANEE	State GA	Zip Code 30024-7593
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) THORNBRIAR CAPITAL		Occupation (for Individual) BUSINESS OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1800.00

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2023  
**Transaction ID : A007F7C1F41304CBE89F**

Amount of Each Receipt this Period  
1800.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6528.00
<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 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**OLD BREED PAC**

**A. MCCORMICK VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 183

City HUDSON	State WI	Zip Code 54016
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FEC ID number of contributing federal political committee. **C** C00828202

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32682.80

Date of Receipt  

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

**Transaction ID : A3A81E0D338454A6681A**

Amount of Each Receipt this Period  
26154.80

Memo Item  
TRANSFER FROM AUTHORIZED COMMITTEE

**B. ABERNATHY, THOMAS, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4725 CUYAHOCA CV

City SUWANEE	State GA	Zip Code 30024
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2023

**Transaction ID : A99D6AAF282DB4A9DB8C**

Amount of Each Receipt this Period  
900.00

Memo Item

**C. SMITHART-OGLESBY, DEBRA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 969 MIDDLE FORK TRL

City SUWANEE	State GA	Zip Code 30024
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2023

**Transaction ID : A370173A7EE1D43A4A6C**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	26154.80
<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 9 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**OLD BREED PAC**

**A. OGLESBY, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 969 MIDDLE FORK TRL  
 City SUWANEE State GA Zip Code 30024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 08 / 2023  
**Transaction ID : A170A499EC3984A64BA4**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. CIRCELLI, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3259 DULUTH HIGHWAY 120 STE 200  
 City DULUTH State GA Zip Code 30096  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 19 / 2023  
**Transaction ID : AB80F1917FA0A4BFD8C7**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. ABERNATHY, CAROL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4725 CUYAHOCA CV  
 City SUWANEE State GA Zip Code 30024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 04 / 06 / 2023  
**Transaction ID : AF422374CA81142D2926**  
 Amount of Each Receipt this Period 900.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**OLD BREED PAC**

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

Mailing Address 120 CAMELOT DR

City HARTWELL	State GA	Zip Code 30643
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACE-O-MATIC	Occupation (for Individual) FOUNDER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y
06 / 13 / 2023

**Transaction ID : A9246B6DDA0FA45EABD/**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 120 CAMELOT DR

City HARTWELL	State GA	Zip Code 30643
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACE-O-MATIC	Occupation (for Individual) VP
---	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y
06 / 13 / 2023

**Transaction ID : AC381DDFDBA71426C90B**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address

City	State	Zip Code
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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
-----------------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	32682.80

# 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)  
**OLD BREED PAC**

Full Name (Last, First, Middle Initial) <b>A. 9SEVEN CONSULTING</b>		Date of Disbursement MM / DD / YYYY 01 / 09 / 2023	
Mailing Address PO BOX 183		FEC Identification Number C [REDACTED] <b>Transaction ID : B6F94AE1A3</b> Amount of Each Disbursement this Period 1089.95	
City HUDSON	State WI	Zip Code 54016-0183	Category/ Type 001
Purpose of Disbursement COMPLIANCE CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. 9SEVEN CONSULTING</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023	
Mailing Address PO BOX 183		FEC Identification Number C [REDACTED] <b>Transaction ID : BB881E2AF8</b> Amount of Each Disbursement this Period 6.00	
City HUDSON	State WI	Zip Code 54016-0183	Category/ Type 001
Purpose of Disbursement COMPLIANCE CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2023	
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C [REDACTED] <b>Transaction ID : B7569C727B</b> Amount of Each Disbursement this Period 404.60	
City NEW ORLEANS	State LA	Zip Code 70112	Category/ Type 001
Purpose of Disbursement CREDIT CARD FEES		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).....▶	1500.55
<b>TOTAL</b> 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)  
**OLD BREED PAC**

Full Name (Last, First, Middle Initial)

### A. ARISTOTLE INTERNATIONAL, INC.

Date of Disbursement

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

Mailing Address PO BOX 716045

FEC Identification Number

C [REDACTED]

Transaction ID : **BD83A10175**  
Amount of Each Disbursement this Period

[REDACTED] 450.00

Memo Item

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement  
DATABASE

001
Category/ Type

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

### B. ARISTOTLE INTERNATIONAL, INC.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	3

Mailing Address PO BOX 716045

FEC Identification Number

C [REDACTED]

Transaction ID : **B61F06B1C9**  
Amount of Each Disbursement this Period

[REDACTED] 450.00

Memo Item

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement  
DATABASE

001
Category/ Type

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

### C. AXCAPITAL, LLC

Date of Disbursement

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

Mailing Address 800 W 47TH ST  
STE 200

FEC Identification Number

C [REDACTED]

Transaction ID : **B6D420D7CE**  
Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

City KANSAS CITY State MO Zip Code 64112-1244

Purpose of Disbursement  
COMPLIANCE CONSULTING

001
Category/ Type

Candidate Name

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

State: District:

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

[REDACTED] 1150.00

**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)  
**OLD BREED PAC**

Full Name (Last, First, Middle Initial) <b>A. AXCAPITAL, LLC</b>			Date of Disbursement MM / DD / YYYY 04 / 07 / 2023	
Mailing Address 800 W 47TH ST STE 200			FEC Identification Number C [REDACTED] <b>Transaction ID : BD05A19016</b> Amount of Each Disbursement this Period 200.00	
City KANSAS CITY	State MO	Zip Code 64112-1244	Memo Item <input type="checkbox"/>	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AXCAPITAL, LLC</b>			Date of Disbursement MM / DD / YYYY 05 / 10 / 2023	
Mailing Address 800 W 47TH ST STE 200			FEC Identification Number C [REDACTED] <b>Transaction ID : B7888FFFCE</b> Amount of Each Disbursement this Period 200.00	
City KANSAS CITY	State MO	Zip Code 64112-1244	Memo Item <input type="checkbox"/>	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AXCAPITAL, LLC</b>			Date of Disbursement MM / DD / YYYY 06 / 06 / 2023	
Mailing Address 800 W 47TH ST STE 200			FEC Identification Number C [REDACTED] <b>Transaction ID : B20EAA06F4</b> Amount of Each Disbursement this Period 250.00	
City KANSAS CITY	State MO	Zip Code 64112-1244	Memo Item <input type="checkbox"/>	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

650.00

**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)  
**OLD BREED PAC**

Full Name (Last, First, Middle Initial) <b>A. MAHONEY, RYAN, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2023
Mailing Address PO BOX 1386		FEC Identification Number <b>C</b> Transaction ID : <b>B168C96D021</b> Amount of Each Disbursement this Period 713.49
City ATHENS	State GA	
Zip Code 30603-1386	Purpose of Disbursement EXPENSE REIMBURSEMENT	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DOUBLETREE</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2023
Mailing Address 320 N 44TH ST		FEC Identification Number <b>C</b> Transaction ID : <b>B92980CE652</b> Amount of Each Disbursement this Period 713.49
City PHOENIX	State AZ	
Zip Code 85008-6501	Purpose of Disbursement LODGING	Memo Item <input checked="" type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OAKVIEW GROUP</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2023
Mailing Address 801 FRONT AVE PO BOX 1611		FEC Identification Number <b>C</b> Transaction ID : <b>BC3AF2C80c</b> Amount of Each Disbursement this Period 933.51
City COLUMBUS	State GA	
Zip Code 31901-2714	Purpose of Disbursement CATERING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

1647.00

**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)  
**OLD BREED PAC**

**A. SIMPSON, JOHN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4798 OLD TIMBER RIDGE RD

City MARIETTA State GA Zip Code 30068-1680

Purpose of Disbursement EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2023

FEC Identification Number: C

Transaction ID : B7FB521853f

Amount of Each Disbursement this Period: 1351.50

Memo Item

**B. STICKERSBANNERS**

Full Name (Last, First, Middle Initial)

Mailing Address 3770 PEACHTREE CREST DR

City DULUTH State GA Zip Code 30097-8165

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2023

FEC Identification Number: C

Transaction ID : B8419151A0F

Amount of Each Disbursement this Period: 1351.50

Memo Item

**C. SINGLETON, PHILIP, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 43824 RIVERPOINT DRIVE

City LEESBURG State VA Zip Code 20176-8497

Purpose of Disbursement EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 20 / 2023

FEC Identification Number: C

Transaction ID : B1BC8E4F3f

Amount of Each Disbursement this Period: 848.05

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2199.55

**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)  
**OLD BREED PAC**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2023
Mailing Address 1 SKYVIEW DR		FEC Identification Number C [ ] <b>Transaction ID : BD7A67DED!</b> Amount of Each Disbursement this Period [ ] 473.40
City FORT WORTH	State TX	Zip Code 76155-1801
Purpose of Disbursement TRAVEL		Category/Type 001
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HOLIDAY INN</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2023
Mailing Address 3 RAVINIA DR NE		FEC Identification Number C [ ] <b>Transaction ID : BBC86EC6E1</b> Amount of Each Disbursement this Period [ ] 282.66
City ATLANTA	State GA	Zip Code 30346-2118
Purpose of Disbursement HOTEL		Category/Type 001
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]
City	State	Zip Code
Purpose of Disbursement		Category/Type [ ]
Candidate Name		Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 7147.10



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

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NAME OF COMMITTEE (In Full)  
**OLD BREED PAC**

**A. COMMITTEE TO ELECT SCOTT HILTON**

Full Name (Last, First, Middle Initial)

Mailing Address 233 12TH ST  
200

City COLUMBUS State GA Zip Code 31901-2462

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2023  Primary  General  Other (specify) ANNUAL

State: District:

Date of Disbursement: 05 / 25 / 2023

FEC Identification Number: C

Transaction ID : B023D95264f

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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