

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 BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO BOX 183 HUDSON WI 54016-0183

2. FEC IDENTIFICATION NUMBER C C00693796 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2024 through 03 / 31 / 2024

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, , , Date 04 / 09 / 2024

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

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

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="2024"/>		<input type="text" value="232430.38"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="232430.38"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="56587.24"/>	<input type="text" value="56587.24"/>
(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="289017.62"/>	<input type="text" value="289017.62"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="223329.72"/>	<input type="text" value="223329.72"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="65687.90"/>	<input type="text" value="65687.90"/>
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 the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

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

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).....	750.00	750.00
(ii) Unitemized .....	6555.00	6555.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7305.00	7305.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	15000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	22305.00	22305.00
12. Transfers From Affiliated/Other Party Committees.....	34133.64	34133.64
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).....	148.60	148.60
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)).....▶	56587.24	56587.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	56587.24	56587.24

**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 .....	42536.72	42536.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	42536.72	42536.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	175000.00	175000.00
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 .....	793.00	793.00
(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)).....	793.00	793.00
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)) ..	223329.72	223329.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	223329.72	223329.72

**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) .....	22305.00	22305.00
34. Total Contribution Refunds (from Line 28(d)) .....	793.00	793.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21512.00	21512.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	42536.72	42536.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	148.60	148.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	42388.12	42388.12

# 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 49
	<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)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

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

Mailing Address 431 VIRGINIA AVE

City CAMPBELL	State CA	Zip Code 95008
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN RIGGING	Occupation (for Individual) RIGGER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 17 / 2024

**Transaction ID : A7082782E792040C5A5D**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 431 VIRGINIA AVE

City CAMPBELL	State CA	Zip Code 95008
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN RIGGING	Occupation (for Individual) RIGGER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 17 / 2024

**Transaction ID : A4918D40FB77F47B0B0B**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 431 VIRGINIA AVE

City CAMPBELL	State CA	Zip Code 95008
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN RIGGING	Occupation (for Individual) RIGGER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2024

**Transaction ID : A7858EA7E7A994AB08F8**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 7 OF 49
(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	

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NAME OF COMMITTEE (In Full)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

**A. FARRELL, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1936 LARCHMONT ROAD  
 City HOUSTON State TX Zip Code 77019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RESMED INC. Occupation (for Individual) FOUNDER & BOARD MEMBER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 28 / 2024**  
**Transaction ID : AC3346ACBBCC346FE96E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. SWAIN, LEONARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1620 FAIRFIELD CIR  
 City GREENFIELD State IN Zip Code 46140  
 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 ▼ 300.00

Date of Receipt **02 / 20 / 2024**  
**Transaction ID : A50F245B683704FEBBDA**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SWAIN, LEONARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1620 FAIRFIELD CIR  
 City GREENFIELD State IN Zip Code 46140  
 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 ▼ 300.00

Date of Receipt **02 / 20 / 2024**  
**Transaction ID : A526524513FFD4BFF8E9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	750.00

**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 8 OF 49
<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)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

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

Mailing Address PO BOX 6687

City LUBBOCK	State TX	Zip Code 79493-6687
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FEC ID number of contributing federal political committee. **C** C00672733

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	/	29	/	2024

**Transaction ID : AADA4C50736FB4FE58D5**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1771 N STREET NW

City WASHINGTON	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00009985

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	/	21	/	2024

**Transaction ID : AEB43F13EE6F34025A8A**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address PO BOX 6687

City LUBBOCK	State TX	Zip Code 79493-6687
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FEC ID number of contributing federal political committee. **C** C00588657

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	/	29	/	2024

**Transaction ID : A853F60B0BCBD480AA1A**

Amount of Each Receipt this Period  
5000.00

Memo Item

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



# 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 9 OF 49
<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)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

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

Mailing Address **PO BOX 909**

City <b>MARYSVILLE</b>	State <b>OH</b>	Zip Code <b>43040</b>
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FEC ID number of contributing federal political committee. **C C00857615**

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

Aggregate Year-to-Date ▼ **34133.64**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2024

**Transaction ID : A857705E4C58646E9A36**

Amount of Each Receipt this Period  

34133.64
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Memo Item  
**TRANSFER FROM AUTHORIZED COMMITTEE - MEMOS ALREADY DISCLOSED**

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

Mailing Address **PO BOX 355**

City <b>DELAWARE</b>	State <b>OH</b>	Zip Code <b>43015</b>
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FEC ID number of contributing federal political committee. **C C00416594**

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

Aggregate Year-to-Date ▼ **1700.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	22	/	2024

**Transaction ID : ACAAC08BD6DFC4EE9870**

Amount of Each Receipt this Period  

1700.00
---------

Memo Item

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

Mailing Address **3465 N PINES WAY**  
**STE 104**

City <b>WILSON</b>	State <b>WY</b>	Zip Code <b>83014</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>REITRED</b>	Occupation (for Individual) <b>RETIRED</b>
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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	/	07	/	2024

**Transaction ID : A800668A2952C4301ABF**

Amount of Each Receipt this Period  

5000.00
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Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>34133.64</b>
<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 10 OF 49  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

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

Mailing Address **5940 WATSON AVENUE**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75225</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**02 / 02 / 2024**

**Transaction ID : AD73E89CBBD914833AF3**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

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

Mailing Address **5940 WATSON AVENUE**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75225</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**02 / 06 / 2024**

**Transaction ID : A3B1A82977A9A4FB8BF9**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

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

Mailing Address **3964 E. PARADISE VIEW DR**

City <b>PARADISE VALLEY</b>	State <b>AZ</b>	Zip Code <b>85253</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**02 / 06 / 2024**

**Transaction ID : A60A9AB82905F47BA96D**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>0.00</b>
<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 49
<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)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

**A. DONDERO, MARCEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3964 E. PARADISE VIEW DR  
 City PARADISE VALLEY State AZ Zip Code 85253  
 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 **02 / 22 / 2024**  
**Transaction ID : A4892F753ACAB4BCBBF2**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. SUTTON, NICHOLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5940 WATSON AVENUE  
 City DALLAS State TX Zip Code 75225  
 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 **03 / 07 / 2024**  
**Transaction ID : A1BC6122E5A7F4898B05**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. DONDERO, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 CRESCENT CT  
 City DALLAS State TX Zip Code 75201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEXPOINT Occupation (for Individual) FOUNDER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 22 / 2024**  
**Transaction ID : A7E5CCCF6CB5740BB99E**  
 Amount of Each Receipt this Period 5000.00  
 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 12 OF 49
<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)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

**A. PECK JR., JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1185  
 City JACKSON State WY Zip Code 83001  
 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  
 M M / D D / Y Y Y Y Y Y  
 02 / 02 / 2024  
**Transaction ID : AC1864212EC954F7DB4B**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. BROPHY, CARLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1185  
 City JACKSON State WY Zip Code 83001  
 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 ▼ 1700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2024  
**Transaction ID : A16C0A94F8103495E887**  
 Amount of Each Receipt this Period  
 1700.00  
 Memo Item

**C. BROPHY, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1185  
 City JACKSON State WY Zip Code 83001-1185  
 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 ▼ 1700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2024  
**Transaction ID : A3D6348E2676D4F8F8D4**  
 Amount of Each Receipt this Period  
 1700.00  
 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:		PAGE 13 OF 49	
(check only one)			
<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)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

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

Mailing Address **3465 N PINES WAY  
STE 104**

City <b>WILSON</b>	State <b>WY</b>	Zip Code <b>83014</b>
-----------------------	--------------------	--------------------------

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

Name of Employer (for Individual) <b>INFORMATION REQUESTED</b>	Occupation (for Individual) <b>INFORMATION REQUESTED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**03 / 27 / 2024**

**Transaction ID : A4629305C78254BC9A1F**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

**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

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>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>34133.64</b>

**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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL, INC.**

Date of Disbursement

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

Mailing Address P.O. BOX 716045

City  
PHILADELPHIA

State  
PA

Zip Code  
19171-6045

FEC Identification Number

C [REDACTED]

**Transaction ID : BCD64E5614**  
Amount of Each Disbursement this Period

[REDACTED] 600.00

Memo Item

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. AXCAPITAL, LLC**

Date of Disbursement

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

Mailing Address 800 W 47TH ST  
STE 200

City  
KANSAS CITY

State  
MO

Zip Code  
64112-1244

FEC Identification Number

C [REDACTED]

**Transaction ID : B4E7F785093**  
Amount of Each Disbursement this Period

[REDACTED] 800.00

Memo Item

Purpose of Disbursement

COMPLIANCE CONSULTING

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	2		1	9		2	0	2	4

Mailing Address 800 W 47TH ST  
STE 200

City  
KANSAS CITY

State  
MO

Zip Code  
64112-1244

FEC Identification Number

C [REDACTED]

**Transaction ID : BD2AFB474**  
Amount of Each Disbursement this Period

[REDACTED] 800.00

Memo Item

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)..... ▶

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

[REDACTED] 2200.00

[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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AXCAPITAL, LLC**

Mailing Address 800 W 47TH ST  
STE 200

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : B6F1A2C245:**  
Amount of Each Disbursement this Period

800.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-3109

Purpose of Disbursement  
DIGITAL CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : B237D8A666:**  
Amount of Each Disbursement this Period

3143.25

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-3109

Purpose of Disbursement  
DIGITAL CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	8		2	0	2	4		

FEC Identification Number

C [REDACTED]

**Transaction ID : BAC2D520C:**  
Amount of Each Disbursement this Period

200.00

Memo Item

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

4143.25

**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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: CAMPAIGN SOLUTIONS. Includes fields for Date of Disbursement (01/31/2024), Mailing Address (117 N SAINT ASAPH ST), City (ALEXANDRIA), State (VA), Zip Code (22314-3109), Purpose of Disbursement (DIGITAL CONSULTING), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: BEEDAC0B8, Amount: 1001.25.

Form B: CAMPAIGN SOLUTIONS. Includes fields for Date of Disbursement (02/05/2024), Mailing Address (117 N SAINT ASAPH ST), City (ALEXANDRIA), State (VA), Zip Code (22314-3109), Purpose of Disbursement (DIGITAL CONSULTING), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: B1BDC58ED2, Amount: 700.00.

Form C: CAMPAIGN SOLUTIONS. Includes fields for Date of Disbursement (02/23/2024), Mailing Address (117 N SAINT ASAPH ST), City (ALEXANDRIA), State (VA), Zip Code (22314-3109), Purpose of Disbursement (DIGITAL CONSULTING), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: B0BD10204E, Amount: 235.00.

SUBTOTAL of Disbursements This Page (optional) 1936.25
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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: CAMPAIGN SOLUTIONS. Includes fields for Date of Disbursement (02/29/2024), Mailing Address (117 N SAINT ASAPH ST), City (ALEXANDRIA), State (VA), Zip Code (22314-3109), Purpose of Disbursement (DIGITAL CONSULTING), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: BC53FD8B06, Amount: 1205.90.

Form B: CAMPAIGN SOLUTIONS. Includes fields for Date of Disbursement (03/18/2024), Mailing Address (117 N SAINT ASAPH ST), City (ALEXANDRIA), State (VA), Zip Code (22314-3109), Purpose of Disbursement (DIGITAL CONSULTING), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: B23E3E7680C, Amount: 6272.79.

Form C: CAMPAIGN SOLUTIONS. Includes fields for Date of Disbursement (03/29/2024), Mailing Address (117 N SAINT ASAPH ST), City (ALEXANDRIA), State (VA), Zip Code (22314-3109), Purpose of Disbursement (DIGITAL CONSULTING), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: BBB5553691, Amount: 270.00.

SUBTOTAL of Disbursements This Page (optional) 7748.69
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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-3109

Purpose of Disbursement  
DIGITAL CONSULTING

001

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : B2F0E2D329

Amount of Each Disbursement this Period

[REDACTED] 747.12

Memo Item

Full Name (Last, First, Middle Initial)

**B. LONGBOAT KEY CLUB**

Mailing Address 220 SANDS POINT ROAD

City  
LONGBOAT KEY

State  
FL

Zip Code  
34228

Purpose of Disbursement  
EVENT FUNDRAISING FEES

001

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	23	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : B76A49D7DF

Amount of Each Disbursement this Period

[REDACTED] 25245.67

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[REDACTED]

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

[REDACTED]

Memo Item

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

[REDACTED] 25992.79

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

[REDACTED] 42020.98

**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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ARMSTRONG FOR CONGRESS**

Mailing Address 1515 BURNT BOAT DR  
# 112

City  
BISMARCK

State  
ND

Zip Code  
58503-1333

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
ARMSTRONG, KELLY, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: ND District: 00

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

FEC Identification Number

C C00670547  
**Transaction ID : BBB96DA908**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. BARRY MOORE FOR CONGRESS**

Mailing Address P.O. BOX 310815

City  
ENTERPRISE

State  
AL

Zip Code  
36331-0815

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
MOORE, FELIX, BARRY, ,

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AL District: 01

Disbursement For: 2024  
 Primary  General  
 Other (specify)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

FEC Identification Number

C C00720375  
**Transaction ID : B511D89DA2**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. BEN CLINE FOR CONGRESS, INC.**

Mailing Address P.O. BOX 1790

City  
HARRISONBURG

State  
VA

Zip Code  
22803-1790

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
CLINE, BENJAMIN, LEE, ,

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District: 06

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

FEC Identification Number

C C00661561  
**Transaction ID : B92B35259B**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--	--	--

# 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. BERNIE MORENO FOR SENATE

Mailing Address PO BOX 340797

City  
COLUMBUS

State  
OH

Zip Code  
43234-0797

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
MORENO, BERNIE, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: OH District:

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C C00837484

Transaction ID : BADD5A73FE

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. BIGGS FOR CONGRESS

Mailing Address 228 S WASHINGTON ST  
STE 115

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-5404

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
BIGGS, ANDY, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: AZ District: 05

Disbursement For: 2024  
 Primary  General  
 Other (specify)

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	4		

FEC Identification Number

C C00610451

Transaction ID : B6DA2AEC96

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. BRIAN JACK FOR CONGRESS

Mailing Address 225 MARKET PLACE CONNECTOR  
NUM 1055

City  
PEACHTREE CITY

State  
GA

Zip Code  
30269-3542

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
JACK, BRIAN, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: GA District: 03

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	9			2	0	2	4		

FEC Identification Number

C C00872473

Transaction ID : B9BFA6CE1

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

**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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHIP ROY FOR CONGRESS**

Mailing Address 6705 W HIGHWAY 290  
STE 50295

City  
AUSTIN

State  
TX

Zip Code  
78735-8400

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name

ROY, CHIP, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: TX District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

FEC Identification Number

C00662767

Transaction ID : BC50AE0827

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. CLIFF BENTZ FOR CONGRESS**

Mailing Address 660 MORGAN AVE

City  
ONTARIO

State  
OR

Zip Code  
97914-8652

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name

BENTZ, CLIFF, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: OR District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

FEC Identification Number

C00725465

Transaction ID : B40477BD1C

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. DARRELL ISSA FOR CONGRESS**

Mailing Address 9070 IRVINE CENTER DR  
STE 150

City  
IRVINE

State  
CA

Zip Code  
92618-4691

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name

ISSA, DARRELL, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 48

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

FEC Identification Number

C00721332

Transaction ID : BA08C04745

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF BILL POSEY

Mailing Address P. O. BOX 411486

City MELBOURNE

State FL

Zip Code 32941-1486

Purpose of Disbursement POLITICAL CONTRIBUTION

011 Category/Type

Candidate Name POSEY, BILL, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: FL District: 08

Disbursement For: 2024
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement

MM/DD/YYYY: 02/13/2024

FEC Identification Number

C00444968
Transaction ID : BB4C55E1DC

Amount of Each Disbursement this Period 5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MATT GAETZ

Mailing Address PO BOX 168

City MARY ESTHER

State FL

Zip Code 32569-0168

Purpose of Disbursement POLITICAL CONTRIBUTION

011 Category/Type

Candidate Name GAETZ, MATT, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: FL District: 01

Disbursement For: 2024
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement

MM/DD/YYYY: 01/09/2024

FEC Identification Number

C00612432
Transaction ID : B885B2F2DD

Amount of Each Disbursement this Period 5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SCOTT DESJARLAIS

Mailing Address 95 WHITE BRIDGE PIKE STE 207

City NASHVILLE

State TN

Zip Code 37205-1482

Purpose of Disbursement POLITICAL CONTRIBUTION

011 Category/Type

Candidate Name DESJARLAIS, SCOTT, HON., ,

Office Sought: [X] House [ ] Senate [ ] President
State: TN District: 04

Disbursement For: 2024
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement

MM/DD/YYYY: 03/21/2024

FEC Identification Number

C00464073
Transaction ID : B7A4A6CED

Amount of Each Disbursement this Period 5000.00

[ ] Memo Item

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

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

15000.00

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)

Form for line numbers 21b-30b with checkboxes, where 23 is selected.

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NAME OF COMMITTEE (In Full)

BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRY FOR CONGRESS

Mailing Address PO BOX 14641

City SURFSIDE BEACH State SC Zip Code 29587-4641

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name FRY, RUSSELL, , ,

Office Sought: [X] House [ ] Senate [ ] President State: SC District: 07

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

011 Category/Type

Date of Disbursement

Date of Disbursement: 01 / 09 / 2024

FEC Identification Number

C00786657

Transaction ID : B2C2A40302I

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. HAGEMAN FOR WYOMING

Mailing Address P.O. BOX 4157

City CHEYENNE State WY Zip Code 82003-4157

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name HAGEMAN, HARRIET, , ,

Office Sought: [X] House [ ] Senate [ ] President State: WY District: 00

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

011 Category/Type

Date of Disbursement

Date of Disbursement: 01 / 09 / 2024

FEC Identification Number

C00788943

Transaction ID : B02B702C62I

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. HUNT FOR CONGRESS

Mailing Address 1707 1/2 POST OAK BLVD # 525

City HOUSTON State TX Zip Code 77056-3801

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name HUNT, WESLEY, , ,

Office Sought: [X] House [ ] Senate [ ] President State: TX District: 38

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

011 Category/Type

Date of Disbursement

Date of Disbursement: 01 / 09 / 2024

FEC Identification Number

C00701003

Transaction ID : BBE76F84F2

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

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

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

15000.00

# 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. JOHN DUARTE FOR CONGRESS

Mailing Address 9460 TEGNER RD

City  
HILMAR

State  
CA

Zip Code  
95324-9320

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
DUARTE, JOHN, , ,

Office Sought:  House  
 Senate  
 President  
State: CA District: 13

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2024

FEC Identification Number

C00808279

Transaction ID : BEA67A00B5

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. KEVIN KILEY FOR CONGRESS

Mailing Address 9458 TREELAKE RD

City  
GRANITE BAY

State  
CA

Zip Code  
95746-6618

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
KILEY, KEVIN, , ,

Office Sought:  House  
 Senate  
 President  
State: CA District: 03

Disbursement For: 2024  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
01 / 09 / 2024

FEC Identification Number

C00801985

Transaction ID : BC5F39AF29/

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. LANCE GOODEN FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2125

City  
TERRELL

State  
TX

Zip Code  
75160-0037

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
GOODEN, LANCE, , ,

Office Sought:  House  
 Senate  
 President  
State: TX District: 05

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 09 / 2024

FEC Identification Number

C00662601

Transaction ID : BA75CC848E

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00



**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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LAUREL LEE FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2024

Mailing Address P.O. BOX 2743

FEC Identification Number

**C** C00815373

**Transaction ID : B8E0388CBD**

Amount of Each Disbursement this Period

5000.00

Memo Item

City  
BRANDON

State  
FL

Zip Code  
33509-2743

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
LEE, LAUREL, MRS., ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: FL District: 15

Full Name (Last, First, Middle Initial)

**B. LAUREN BOEBERT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2024

Mailing Address PO BOX 2026

FEC Identification Number

**C** C00728238

**Transaction ID : B65F46F9298**

Amount of Each Disbursement this Period

5000.00

Memo Item

City  
ELIZABETH

State  
CO

Zip Code  
80107-2026

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
BOEBERT, LAUREN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CO District: 04

Full Name (Last, First, Middle Initial)

**C. MCCLINTOCK FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2024

Mailing Address 9458 TREELAKE RD

FEC Identification Number

**C** C00446815

**Transaction ID : B4D000D0C3**

Amount of Each Disbursement this Period

5000.00

Memo Item

City  
GRANITE BAY

State  
CA

Zip Code  
95746-6618

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
MCCLINTOCK, THOMAS, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 05

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

15000.00

**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 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. MIKE BOST FOR CONGRESS COMMITTEE

Date of Disbursement

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

Mailing Address PO BOX 1212

FEC Identification Number

C	C00546499
---	-----------

**Transaction ID : B40F4D2751/**

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

City  
MURPHYSBORO

State  
IL

Zip Code  
62966-1212

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011
Category/ Type

Candidate Name

BOST, MICHAEL, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: IL District: 12

Full Name (Last, First, Middle Initial)

### B. MONICA FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

Mailing Address PO BOX 4605

FEC Identification Number

C	C00765719
---	-----------

**Transaction ID : BD5A679A0B**

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

City  
MCALLEN

State  
TX

Zip Code  
78502-4605

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011
Category/ Type

Candidate Name

DE LA CRUZ, MONICA, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: TX District: 15

Full Name (Last, First, Middle Initial)

### C. NATHANIEL MORAN FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

Mailing Address 314 S BROADWAY AVE

FEC Identification Number

C	C00796086
---	-----------

**Transaction ID : BD03717D76**

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

City  
TYLER

State  
TX

Zip Code  
75702-7304

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011
Category/ Type

Candidate Name

MORAN, NATHANIEL, QUENTIN, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: TX District: 01

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

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

15000.00
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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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)

BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. NEHLS FOR CONGRESS

Mailing Address 15500 VOSS RD STE 518

City SUGAR LAND State TX Zip Code 77498-4601

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name NEHLS, TROY, , ,

Office Sought: [X] House [ ] Senate [ ] President State: TX District: 22

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

011 Category/Type

Date of Disbursement

01 / 09 / 2024

FEC Identification Number

C00730150

Transaction ID : B10C0E246E

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. PATRIOTS FOR PERRY

Mailing Address 4075 LINGLESTOWN RD PMB 119

City HARRISBURG State PA Zip Code 17112-1020

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name PERRY, SCOTT, , ,

Office Sought: [X] House [ ] Senate [ ] President State: PA District: 10

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

011 Category/Type

Date of Disbursement

02 / 06 / 2024

FEC Identification Number

C00510164

Transaction ID : B0668F031C3

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT FITZGERALD FOR CONGRESS

Mailing Address PO BOX 484

City OCONOMOWOC State WI Zip Code 53066-0484

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name FITZGERALD, SCOTT, , ,

Office Sought: [X] House [ ] Senate [ ] President State: WI District: 05

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

011 Category/Type

Date of Disbursement

01 / 09 / 2024

FEC Identification Number

C00720011

Transaction ID : B8DDEBAC6

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

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

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

15000.00

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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. THOMAS MASSIE FOR CONGRESS

Mailing Address PO BOX 821

City NEWPORT State KY Zip Code 41072

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name MASSIE, THOMAS, H.,

Office Sought: [X] House [ ] Senate [ ] President
State: KY District: 04

Disbursement For: 2024
[X] Primary [ ] General
[ ] Other (specify) ▼

011
Category/Type

Date of Disbursement

Date of Disbursement: 01 / 09 / 2024

FEC Identification Number

C00509729

Transaction ID : BD2BE1685F

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. TIFFANY FOR WISCONSIN, INC.

Mailing Address PO BOX 1007

City WAUSAU State WI Zip Code 54402-1007

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name TIFFANY, TOM, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: WI District: 07

Disbursement For: 2024
[X] Primary [ ] General
[ ] Other (specify) ▼

011
Category/Type

Date of Disbursement

Date of Disbursement: 01 / 09 / 2024

FEC Identification Number

C00718635

Transaction ID : B4631E94AA

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP SAVE AMERICA JOINT FUNDRAISING COMMITTEE

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219-3570

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name TRUMP SAVE AMERICA JOINT FUNDRAISING COMMITTEE

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2024
[ ] Primary [ ] General
[X] Other (specify) ▼ ANNUAL

011
Category/Type

Date of Disbursement

Date of Disbursement: 02 / 06 / 2024

FEC Identification Number

C00770941

Transaction ID : B4D87EA950

Amount of Each Disbursement this Period

10000.00

[ ] Memo Item

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

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

20000.00

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)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. VAN DREW FOR CONGRESS

Mailing Address PO BOX 671

City CAPE MAY COURT HOUSE

State NJ

Zip Code 08210-0671

Purpose of Disbursement POLITICAL CONTRIBUTION

Category/Type: 011

Candidate Name VAN DREW, JEFF, MR, ,

Office Sought: [X] House, [ ] Senate, [ ] President. State: NJ, District: 02

Disbursement For: 2024. [X] Primary, [ ] General, [ ] Other (specify)

Date of Disbursement

Date: 01 / 09 / 2024

FEC Identification Number

C00661868

Transaction ID : B6173B28AA

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. VICTORIA SPARTZ FOR CONGRESS

Mailing Address PO BOX 505

City NOBLESVILLE

State IN

Zip Code 46061-0505

Purpose of Disbursement POLITICAL CONTRIBUTION

Category/Type: 011

Candidate Name SPARTZ, VICTORIA, , ,

Office Sought: [X] House, [ ] Senate, [ ] President. State: IN, District: 05

Disbursement For: 2024. [X] Primary, [ ] General, [ ] Other (specify)

Date of Disbursement

Date: 03 / 18 / 2024

FEC Identification Number

C00737767

Transaction ID : B4381CA540f

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. YOUNG KIM FOR CONGRESS

Mailing Address PO BOX 17490

City ANAHEIM

State CA

Zip Code 92817-7490

Purpose of Disbursement POLITICAL CONTRIBUTION

Category/Type: 011

Candidate Name KIM, YOUNG, , ,

Office Sought: [X] House, [ ] Senate, [ ] President. State: CA, District: 40

Disbursement For: 2024. [X] Primary, [ ] General, [ ] Other (specify)

Date of Disbursement

Date: 03 / 05 / 2024

FEC Identification Number

C00665638

Transaction ID : B7F7B615E0

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

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

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

15000.00

[ ]

**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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. YVETTE4CONGRESS**

Mailing Address PO BOX 404

City  
LA LUZ

State  
NM

Zip Code  
88337-0404

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011
Category/ Type

Candidate Name  
HERRELL, STELLA, YVETTE, ,

Office Sought:  House  
 Senate  
 President

State: NM District: 02

Disbursement For: 2024

Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2024

FEC Identification Number

C C00655571

Transaction ID : B56A01D1A7

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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Memo Item

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

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

5000.00
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175000.00
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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)

Form for line numbers 21b-30b with checkboxes. 21b and 28a are checked.

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NAME OF COMMITTEE (In Full)

BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALLEN, LISA, , ,

Mailing Address 890 JOHNSON LN

City OVILLA

State TX

Zip Code 75154

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Category/Type 010

Candidate Name

Office Sought: House, Senate, President. State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date: 02 / 22 / 2024

FEC Identification Number

C [Redacted]

Transaction ID : BE11100CEB
Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ALLEN, LISA, , ,

Mailing Address 890 JOHNSON LN

City OVILLA

State TX

Zip Code 75154

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Category/Type 010

Candidate Name

Office Sought: House, Senate, President. State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date: 02 / 22 / 2024

FEC Identification Number

C [Redacted]

Transaction ID : B4B2C1BDA/
Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ATCHLEY, DONNA, , ,

Mailing Address 9970 SW 98TH LANE

City OCALA

State FL

Zip Code 34481

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Category/Type 010

Candidate Name

Office Sought: House, Senate, President. State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date: 02 / 22 / 2024

FEC Identification Number

C [Redacted]

Transaction ID : B08F244E60:
Amount of Each Disbursement this Period

10.00

Memo Item

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

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

30.00

[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)

Grid for line numbers 21b-30b with checkboxes. 28a is checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: Disbursement for BANKS, SUE. Includes fields for Name, Address, Date (02/22/2024), City (DORAVILLE, GA), Purpose (REFUND OF CONTRIBUTIONS), and Amount (10.00).

Form B: Disbursement for BANKS, SUE. Includes fields for Name, Address, Date (02/22/2024), City (DORAVILLE, GA), Purpose (REFUND OF CONTRIBUTIONS), and Amount (10.00).

Form C: Disbursement for BELCHER, WILLIAM. Includes fields for Name, Address, Date (02/22/2024), City (CAMPBELL, CA), Purpose (REFUND OF CONTRIBUTIONS), and Amount (100.00).

SUBTOTAL of Disbursements This Page (optional) 120.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BELL, EMMA, , ,**

Mailing Address 2110CONTINENTAL DR

City  
KILLEEN

State  
TX

Zip Code  
76543

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : B7B1E2EF65

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. BLEVINS, BAXTER, , ,**

Mailing Address 249 BIRCH LN.

City  
TOCCOA

State  
GA

Zip Code  
30577

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : BEF4E9EB21.

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. BREZOVSKI, WILLIAM, , ,**

Mailing Address 5516 BOULDER HWY #360, 14

City  
LAS VEGAS

State  
NV

Zip Code  
89122

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : BB9F0660FE

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

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

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

3	0	0	0	0	0	0	0	0	0
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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)

21b 22 23 26 27
28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BURRIS, MARGE, , ,

Mailing Address 2 MOUNTAIN VIEW DRIVE

City PLAINVILLE

State CT

Zip Code 06062

Purpose of Disbursement REFUND OF CONTRIBUTIONS

010

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

02 / 22 / 2024

FEC Identification Number

C Transaction ID : BD4F0E22C0

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BUXTON, PATTI, , ,

Mailing Address 5661 BERNATH CT

City TOLEDO

State OH

Zip Code 43615

Purpose of Disbursement REFUND OF CONTRIBUTIONS

010

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

02 / 23 / 2024

FEC Identification Number

C Transaction ID : B21AAF8607I

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CRAWFORD, JOHN, , ,

Mailing Address 98 MCCORMACK DR.

City LAKE GEORGE

State NY

Zip Code 12845

Purpose of Disbursement REFUND OF CONTRIBUTIONS

010

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

02 / 26 / 2024

FEC Identification Number

C Transaction ID : B236C181CF

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

25.00

**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 checked="" 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DARROW, CAROLYN, , ,**

Mailing Address 22 LAKECREST DR

City  
DANBURY

State  
CT

Zip Code  
06811

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	3		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : BE8F19653C

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

**B. FITZGERALD, SHARON, , ,**

Mailing Address 8039 C DR N

City  
BATTLE CREEK

State  
MI

Zip Code  
49014

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	3		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : B40E168D62E

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

**C. FLEGE, KAREN, , ,**

Mailing Address 40 SOUTH TAMARACK RD

City  
AKRON

State  
OH

Zip Code  
44319

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	3		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : B1135E22C0

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

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

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

3	0	0	0	0	0	0	0	0	0


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)

Grid for line numbers 21b-30b with checkboxes. 21b and 28a are checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: GARNER, SUSAN M, , , Disbursement details including date (02/23/2024), amount (5.00), and transaction ID (B831EBA711).

Form B: GARNER, SUSAN M, , , Disbursement details including date (02/23/2024), amount (5.00), and transaction ID (B690E11BAE).

Form C: GOLOUBENKO, SERGE, , , Disbursement details including date (02/23/2024), amount (25.00), and transaction ID (BE05527305).

SUBTOTAL of Disbursements This Page (optional) 35.00
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)

Form for line numbers 21b-30b with checkboxes. 21b and 28a are checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: GOLOUBENKO, SERGE, , , . Includes fields for Date of Disbursement (02/23/2024), FEC Identification Number (C), Transaction ID (B8974341DA), and Amount of Each Disbursement (25.00).

Form B: GUERRERO, ROY, , , . Includes fields for Date of Disbursement (02/23/2024), FEC Identification Number (C), Transaction ID (BC2495B874), and Amount of Each Disbursement (10.00).

Form C: GUERRERO, ROY, , , . Includes fields for Date of Disbursement (02/23/2024), FEC Identification Number (C), Transaction ID (B3471D19BE), and Amount of Each Disbursement (10.00).

SUBTOTAL of Disbursements This Page (optional) 45.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. HARELOSN, TED, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2024
Mailing Address 3685 JACKDAW ST		FEC Identification Number C [REDACTED] <b>Transaction ID : B97927F6E3f</b>
City SAN DIEGO	State CA	Zip Code 92103
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 10.00
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. LEECH, GERALD, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2024
Mailing Address 117 SAINT KITTS WAY		FEC Identification Number C [REDACTED] <b>Transaction ID : B92B70A2D4f</b>
City APOLLO BEACH	State FL	Zip Code 33572
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
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. LOGAN, GREGORY, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2024
Mailing Address PO BOX 5236		FEC Identification Number C [REDACTED] <b>Transaction ID : B4E0BBD88f</b>
City WHITEFISH	State MT	Zip Code 59937
Purpose of Disbursement REFUND OF CONTRIBUTIONS		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 10.00
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).....▶	45.00
<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)

Form for line numbers 21b-30b with checkboxes. 21b and 28a are checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: LUSBY, NANCY, , ,
Mailing Address 32 SUDLEY LANE
City MARTINSBURG State WV Zip Code 25403
Purpose of Disbursement REFUND OF CONTRIBUTIONS
Candidate Name
Office Sought: House
Disbursement For: Primary
Amount of Each Disbursement this Period 5.00

Form B: MADRAZO, RENNARD, , ,
Mailing Address 305 PINEY MOUNTAIN DRIVE
City ASHEVILLE State NC Zip Code 28805
Purpose of Disbursement REFUND OF CONTRIBUTIONS
Candidate Name
Office Sought: House
Disbursement For: Primary
Amount of Each Disbursement this Period 10.00

Form C: MAESCHEN, WESLEY, , ,
Mailing Address 1411 WINDEMERE LANE
City TUSTIN State CA Zip Code 92780
Purpose of Disbursement REFUND OF CONTRIBUTIONS
Candidate Name
Office Sought: House
Disbursement For: Primary
Amount of Each Disbursement this Period 10.00

SUBTOTAL of Disbursements This Page (optional) 25.00
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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: MCFALL, ROBERT, , , . Includes fields for Date of Disbursement (02/23/2024), Mailing Address (4033 LUNAR ECLIPSE DRIVE), City (DUMFRIES, VA), Purpose (REFUND OF CONTRIBUTIONS), and Transaction ID (BB84CCBA6).

Form B: MCFALL, ROBERT, , , . Includes fields for Date of Disbursement (02/23/2024), Mailing Address (4033 LUNAR ECLIPSE DRIVE), City (DUMFRIES, VA), Purpose (REFUND OF CONTRIBUTIONS), and Transaction ID (BF0948B2F27).

Form C: MERCUS, ALEXANDRINA, , , . Includes fields for Date of Disbursement (02/23/2024), Mailing Address (54 SCHOOL STREET, APT.316), City (WESTBURY, NY), Purpose (REFUND OF CONTRIBUTIONS), and Transaction ID (B5DB1BC86).

SUBTOTAL of Disbursements This Page (optional) 30.00
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)

Grid for line numbers 21b-30b with checkboxes. 28a is checked.

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)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: MERCUS, ALEXANDRINA, , ,
Mailing Address 54 SCHOOL STREET,APT.316
City WESTBURY State NY Zip Code 11590
Purpose of Disbursement REFUND OF CONTRIBUTIONS
Candidate Name
Office Sought: House
Disbursement For: Primary
State: District:
Date of Disbursement 02 / 23 / 2024
FEC Identification Number C
Transaction ID : B1C8CE0D8E
Amount of Each Disbursement this Period 10.00
Memo Item

Form B: MILTENBERGER, DANIEL, , ,
Mailing Address 2825 JACKSON ST. SE
City ALBANY State OR Zip Code 97322
Purpose of Disbursement REFUND OF CONTRIBUTIONS
Candidate Name
Office Sought: House
Disbursement For: Primary
State: District:
Date of Disbursement 02 / 23 / 2024
FEC Identification Number C
Transaction ID : B921A01C26
Amount of Each Disbursement this Period 10.00
Memo Item

Form C: MILTENBERGER, DANIEL, , ,
Mailing Address 2825 JACKSON ST. SE
City ALBANY State OR Zip Code 97322
Purpose of Disbursement REFUND OF CONTRIBUTIONS
Candidate Name
Office Sought: House
Disbursement For: Primary
State: District:
Date of Disbursement 02 / 23 / 2024
FEC Identification Number C
Transaction ID : B77F7F0691
Amount of Each Disbursement this Period 10.00
Memo Item

SUBTOTAL of Disbursements This Page (optional) 30.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

**A. MUELLER, JOSEPH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 42 NASSAU ROAD

City POUGHKEEPSIE State NY Zip Code 12601

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 23 / 2024

FEC Identification Number: C

Transaction ID : BAEB68F506

Amount of Each Disbursement this Period: 10.00

Memo Item

**B. MUELLER, JOSEPH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 42 NASSAU ROAD

City POUGHKEEPSIE State NY Zip Code 12601

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 23 / 2024

FEC Identification Number: C

Transaction ID : BFE5B58682!

Amount of Each Disbursement this Period: 10.00

Memo Item

**C. O. LANDRY, DOTTIE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 6519 FLEUR DE LIS DRIVE

City NEW ORLEANS State LA Zip Code 70124

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 26 / 2024

FEC Identification Number: C

Transaction ID : B41735E627,

Amount of Each Disbursement this Period: 5.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 25.00

**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)

Form for line numbers 21b-30b with checkboxes. 28a is checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: QUIGLEY, ERNIE, , , . Includes fields for Date of Disbursement (02/26/2024), Mailing Address (1603 W. BENT TREE DR.), City (PHOENIX), State (AZ), Zip Code (85085), Purpose of Disbursement (REFUND OF CONTRIBUTIONS), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other).

Form B: REDDING, JAMES, , , . Includes fields for Date of Disbursement (02/26/2024), Mailing Address (3230 W PICASSO PLACE), City (TUCSON), State (AZ), Zip Code (85742), Purpose of Disbursement (REFUND OF CONTRIBUTIONS), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other).

Form C: REDDING, JAMES, , , . Includes fields for Date of Disbursement (02/26/2024), Mailing Address (3230 W PICASSO PLACE), City (TUCSON), State (AZ), Zip Code (85742), Purpose of Disbursement (REFUND OF CONTRIBUTIONS), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other).

SUBTOTAL of Disbursements This Page (optional) 58.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RICK, DALE, , ,**

Mailing Address 3412 WEST PARKHILL AVE, 16

City MILWAUKEE State WI Zip Code 53208

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

010  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2024

FEC Identification Number

C [REDACTED]

Transaction ID : B2E7BD7CBI

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. RIVERA, JOSE G, , ,**

Mailing Address 1107 UDALL ROAD

City BAY SHORE State NY Zip Code 11706

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

010  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2024

FEC Identification Number

C [REDACTED]

Transaction ID : BB339CCF00

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RIVERA, JOSE G, , ,**

Mailing Address 1107 UDALL ROAD

City BAY SHORE State NY Zip Code 11706

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

010  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2024

FEC Identification Number

C [REDACTED]

Transaction ID : B4372B7948I

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

60.00

[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)

Form for line numbers 21b-30b with checkboxes. 21b and 28a are checked.

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NAME OF COMMITTEE (In Full)
BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE

Form A: Disbursement for SILVA, CARLOS. Includes fields for name, address, date (02/26/2024), purpose (REFUND OF CONTRIBUTIONS), and amount (10.00).

Form B: Disbursement for SMETANA, CAROL. Includes fields for name, address, date (02/26/2024), purpose (REFUND OF CONTRIBUTIONS), and amount (10.00).

Form C: Disbursement for SWAIN, LEONARD. Includes fields for name, address, date (02/26/2024), purpose (REFUND OF CONTRIBUTIONS), and amount (100.00).

SUBTOTAL of Disbursements This Page (optional) 120.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TOM, FRANKLIN, , ,**

Mailing Address 1343 BRANCHWOOD CIRCLE,, APT. 102

City  
NAPERVILLE

State  
IL

Zip Code  
60563

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	6		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : B10FAACA07

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

**B. WALTON, DEONRA, , ,**

Mailing Address 6205 GOLD STREET

City  
HOUSTON

State  
TX

Zip Code  
77026

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	6		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : B3B70C3141I

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

**C. WALTON, DEONRA, , ,**

Mailing Address 6205 GOLD STREET

City  
HOUSTON

State  
TX

Zip Code  
77026

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

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	6		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : B2B97A6A28

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Memo Item

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

2	0	0	0	0	0	0	0	0	0

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WEST, IRENE, , ,**

Mailing Address 13464 STONE CANYON ROAD

City  
PIWAY

State  
CA

Zip Code  
92064

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2024

FEC Identification Number

C [REDACTED]

Transaction ID : B6634FF951/

Amount of Each Disbursement this Period

5.00
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Memo Item

Full Name (Last, First, Middle Initial)

**B. WEST, IRENE, , ,**

Mailing Address 13464 STONE CANYON ROAD

City  
PIWAY

State  
CA

Zip Code  
92064

Purpose of Disbursement  
REFUND OF CONTRIBUTIONS

010

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2024

FEC Identification Number

C [REDACTED]

Transaction ID : B8FBD47351/

Amount of Each Disbursement this Period

5.00
------

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

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Memo Item

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

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

10.00
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793.00
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# 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)

**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHENEY FOR SCC**

Mailing Address 2081 W ELM ST

City  
LIMA

State  
OH

Zip Code  
45805-2653

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) **ANNUAL**

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B829AAC4AC**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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