

# 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**  
Check if different than previously reported. (ACC) **HUDSON WI 54016-0183**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**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)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2023 through  /  /  2023

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

Signature of Treasurer **DATWYLER, THOMAS, , ,** Date  /  /  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="2023"/>		<input type="text" value="123164.54"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="116562.52"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="320954.08"/>	<input type="text" value="382140.16"/>
(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="437516.60"/>	<input type="text" value="505304.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="205086.22"/>	<input type="text" value="272874.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="232430.38"/>	<input type="text" value="232430.38"/>
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:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	46240.00	51740.00
(ii) Unitemized .....	240014.08	258469.40
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	286254.08	310209.40
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	27000.00	59500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	313254.08	369709.40
12. Transfers From Affiliated/Other Party Committees.....	7700.00	12430.76
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	320954.08	382140.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	320954.08	382140.16

**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 .....	198971.22	249257.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	198971.22	249257.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	22300.00
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 .....	1115.00	1317.00
(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)).....	1115.00	1317.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	205086.22	272874.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	205086.22	272874.32

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	313254.08	369709.40
34. Total Contribution Refunds (from Line 28(d)) .....	1115.00	1317.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	312139.08	368392.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	198971.22	249257.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	198971.22	249257.32

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 54  
 (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**

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

Mailing Address **8422 PEARL RD**

City <b>STRONGSVILLE</b>	State <b>OH</b>	Zip Code <b>44136</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>
---	---

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  
**12 / 15 / 2023**

**Transaction ID : A37F4CCBB63FF42F0BB2**

Amount of Each Receipt this Period  
**100.00**

Memo Item

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

Mailing Address **13459 ANAPHOLIS**

City <b>BLACK BUTTE RANCH</b>	State <b>OR</b>	Zip Code <b>97759</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>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 16 / 2023**

**Transaction ID : A2303F7816299461B85F**

Amount of Each Receipt this Period  
**250.00**

Memo Item

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

Mailing Address **4692 N 300 W**  
**STE 210**

City <b>PROVO</b>	State <b>UT</b>	Zip Code <b>84604-7714</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>RM JOBS</b>	Occupation (for Individual) <b>MANAGER</b>
---	---

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  
**10 / 30 / 2023**

**Transaction ID : A72E0C0579512432FADA**

Amount of Each Receipt this Period  
**300.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>650.00</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 7 OF 54
	<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. BELCHER, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 431 VIRGINIA AVE  
 City CAMPBELL State CA Zip Code 95008  
 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 12 / 16 / 2023  
**Transaction ID : A56B21560E07C4F408F6**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BOTIMER, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13753 LOCUST LANE  
 City NAMPA State ID Zip Code 83686  
 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 ▼ 250.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : A1FEA65370D704F2B867**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. BOYD, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 645 LAWNWOOD DR.  
 City GREENWOOD State IN Zip Code 46142  
 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 ▼ 2000.00

Date of Receipt 10 / 19 / 2023  
**Transaction ID : AC9973267B9264E64BB4**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2350.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 54
<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**

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

Mailing Address **317 MANSION DRIVE**

City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22302-2904</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>KIRKLAND &amp; ELLIS</b>	Occupation (for Individual) <b>LAWYER</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**15000.00**

Date of Receipt  
**12 / 12 / 2023**

**Transaction ID : AAF6EE1D5D3A74109A0C**

Amount of Each Receipt this Period  
**10000.00**

Memo Item

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

Mailing Address **10049 OLDFIELD DRIVE**

City <b>RICHMOND</b>	State <b>VA</b>	Zip Code <b>23235</b>
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**10 / 17 / 2023**

**Transaction ID : A26ED7785ABD747458DC**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

Mailing Address **1109 KNDAL WAY**

City <b>SLEEPY HOLLOW</b>	State <b>NY</b>	Zip Code <b>10591</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 ▼  
**500.00**

Date of Receipt  
**10 / 17 / 2023**

**Transaction ID : ADD2DCA03823A4DA4AA9**

Amount of Each Receipt this Period  
**500.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>11500.00</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: PAGE 9 OF 54  
(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**

**A. CATON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 270 QUILL AVENUE  
 City THE VILLAGES State FL Zip Code 32162  
 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 12 / 18 / 2023  
**Transaction ID : A1F7F9CF988BA4BF7BF4**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. COHEN, GERALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4605 S. OCEAN BLVD. APT. 3C  
 City HIGHLAND BEACH State FL Zip Code 33487  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GREENLEY Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 16 / 2023  
**Transaction ID : AA054756FB34C43ACA7C**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. DAVIS, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 710 MARGARET STREET  
 City SAN JOSE State CA Zip Code 95112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TMFC, INC. Occupation (for Individual) TMFC, INC.  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : A5843655B0C6844288DA**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 10 OF 54
(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. DAY, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35205 N 45TH STREET  
 City CAVE CREEK State AZ Zip Code 85331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STRONGWATCH Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : A162C011B75DE43D3ADC**  
 Amount of Each Receipt this Period 3300.00  
 Memo Item

**B. DELANEY, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 331 MAYFLOWER CIRCLE  
 City HANOVER. State MA Zip Code 02339  
 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 ▼ 250.00

Date of Receipt 10 / 18 / 2023  
**Transaction ID : AC5369C7E6FF04CACB6D**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. DUBOIS, BERNARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 134 OLD SETTLERS RD  
 City BARRINGTON State NH Zip Code 03825  
 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 ▼ 250.00

Date of Receipt 10 / 18 / 2023  
**Transaction ID : ACEC02E09DB6845DDBC1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. DULIN, CYNTHIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1340 THUNDER RIDGE RD  
 City SANTA FE State NM Zip Code 87501  
 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 ▼ 250.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : A9BD616AA38FF4B568F7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. EBNER, ALEX, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1095 MANHATTAN BLVD 2407  
 City DAYTON State KY Zip Code 41074  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACE MEDICAL COMPANY Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 16 / 2023  
**Transaction ID : A14FF3C879E704FF99DA**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. ELLIOTT, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6621 TALMADGE LN.  
 City DALLAS State TX Zip Code 75230  
 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 ▼ 1000.00

Date of Receipt 10 / 19 / 2023  
**Transaction ID : A171460DFC1DB407386C**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

**A. ERCOLINI, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 195 BRIDLE PATH  
 City NORTH ANDOVER State MA Zip Code 01845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) APPA LLC Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2023  
**Transaction ID : A23FF930CF8E143F19C3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. FRAZEE, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6313 EVERMAY DRIVE  
 City MCLEAN State VA Zip Code 22101-2309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TWINLOGIC STRATEGIES Occupation (for Individual) CONSULTANT/BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 10 / 2023  
**Transaction ID : A4285F90B35C1406FA10**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. FULTON, JULIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30630 E. POINTE DR.  
 City GIBRALTAR State MI Zip Code 48173  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CLAY MAGIC INC Occupation (for Individual) OWNER SCULPTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2023  
**Transaction ID : A0A11D4DB9FF046F890C**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE**

**A. GARCIA, JULIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2860 PONY DRIVE  
 City LAKE HAVASU CITY State AZ Zip Code 86406  
 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  
 M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2023  
**Transaction ID : A6D31982442D44F3CB8C**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. GARCIA, JULIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2860 PONY DRIVE  
 City LAKE HAVASU CITY State AZ Zip Code 86406  
 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 ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2023  
**Transaction ID : A8856AF5D350C4CB0A3C**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. GARCIA, JULIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2860 PONY DRIVE  
 City LAKE HAVASU CITY State AZ Zip Code 86406  
 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 ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2023  
**Transaction ID : AA2BE965F024B4178BAC**  
 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: (check only one)	PAGE 14 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

**A. GARCIA, JULIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2860 PONY DRIVE  
 City LAKE HAVASU CITY State AZ Zip Code 86406  
 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 ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2023  
**Transaction ID : AD90BD93134EB429893D**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. GARCIA, JULIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2860 PONY DRIVE  
 City LAKE HAVASU CITY State AZ Zip Code 86406  
 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 ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2023  
**Transaction ID : A8E712457152E40E38D6**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. GARCIA, JULIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2860 PONY DRIVE  
 City LAKE HAVASU CITY State AZ Zip Code 86406  
 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 ▼ 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 24 / 2023  
**Transaction ID : A9F2CC78A45A045C1BB3**  
 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: (check only one)	PAGE 15 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. GARLAND, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 362 BUNKERHILL GLENDON RD  
 City WASHINGTON COURT HOUSE State OH Zip Code 43160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 16 / 2023  
**Transaction ID : AC7E9FBA5AD1745278A0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. GILBERT, BETTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 261 MERRITT RD  
 City FULTON State NY Zip Code 13069  
 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 ▼ 250.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : AE1A5701351EE4A16919**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. GILBERT, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 885 PARK AVE  
 City NEW YORK State NY Zip Code 10075  
 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 ▼ 2000.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : AE79146229FF54192899**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<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 16 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. GLECKLER, SHANNON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1975 W GLOWING GRANITE PLACE  
 City ORO VALLEY State AZ Zip Code 85755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEOST Occupation (for Individual) EXECUTIVE DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : A3CA02A4AF28045C5A88**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. GOGOLAK, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 HIGHVIEW RD  
 City DARIEN State CT Zip Code 06820  
 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 ▼ 250.00

Date of Receipt 10 / 18 / 2023  
**Transaction ID : A7F94C48D2B784237AEB**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. GORDON, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3175-B 17TH STREET SOUTH  
 City FARGO State ND Zip Code 58103  
 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 ▼ 250.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : AE417FB78C52B408597E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<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 17 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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. GREAVES, WILLIAM, , ,**

Mailing Address **8851 NORTH BAYSIDE DRIVE**

City <b>BAYSIDE</b>	State <b>WI</b>	Zip Code <b>53217</b>
------------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**10 / 18 / 2023**

**Transaction ID : A20D9D66E965C44E78B2**

Amount of Each Receipt this Period  
**250.00**

Memo Item

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

Mailing Address **5902 S ATLANTA PLACE**

City <b>TULSA</b>	State <b>OK</b>	Zip Code <b>74105</b>
----------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 27 / 2023**

**Transaction ID : A9D754D3AE3D44A9C834**

Amount of Each Receipt this Period  
**250.00**

Memo Item

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

Mailing Address **11126 ELMVIEW PLACE**

City <b>GREAT FALLS</b>	State <b>VA</b>	Zip Code <b>22066</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>
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**10 / 17 / 2023**

**Transaction ID : ABE4A3A158B0344B48F1**

Amount of Each Receipt this Period  
**500.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</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: PAGE 18 OF 54  
(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. HARNISH, PHYLLIS, , ,**

Mailing Address **7323 SOUNDVIEW LANE**

City **GIG HARBOR** State **WA** Zip Code **98335**

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

Name of Employer (for Individual) **SELF** Occupation (for Individual) **PROPERTY MGR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**10 / 17 / 2023**

**Transaction ID : AA5A402C612504299936**

Amount of Each Receipt this Period  
**250.00**

Memo Item

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

Mailing Address **10306 E. CALLE DE LAS BRISAS**

City **SCOTTSDALE** State **AZ** Zip Code **85255**

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 ▼ **250.00**

Date of Receipt  
**10 / 17 / 2023**

**Transaction ID : A4233B9F936CA48609D9**

Amount of Each Receipt this Period  
**250.00**

Memo Item

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

Mailing Address **223 EAST BAKERVIEW RD. APT 341**

City **BELLINGHAM** State **WA** Zip Code **98226**

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 ▼ **250.00**

Date of Receipt  
**10 / 17 / 2023**

**Transaction ID : AAD2470CD47A24052B7A**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **750.00**

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

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

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

FOR LINE NUMBER: PAGE 19 OF 54  
(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**

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

Mailing Address 17397 NORTH SHORE ESTATES ROAD

City SPRING LAKE	State MI	Zip Code 49456
---------------------	-------------	-------------------

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

Name of Employer (for Individual) VAPROSHIELD	Occupation (for Individual) MANAGING PARTNER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2023

**Transaction ID : A9B1CB32223C345C6A53**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 13241 CRISA DRIVE

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2023

**Transaction ID : A6116BC9047B54E5893A**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 5105 STILLHOUSE RD

City HUME	State VA	Zip Code 22639
--------------	-------------	-------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2023

**Transaction ID : A068A4AA16673407F808**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<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 20 OF 54
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<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. KINGSBURY, BETH, , ,**

Mailing Address 10681 NW 107TH ST

City YUKON	State OK	Zip Code 73099
---------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUCKING
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2023

**Transaction ID : A9B343E6C171C4172B17**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address PO BOX 7419

City ABILENE	State TX	Zip Code 79608
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2023

**Transaction ID : A8335D664AC3D432E818**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 1254 EAGLE RD

City NEWHOPE	State PA	Zip Code 18938
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ROB?S	Occupation (for Individual) OWER
--	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2023

**Transaction ID : ABF4CFB7BD35D4E829B1**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. MAIOLINI, EZIO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5056 PROCTOR AVENUE  
 City OAKLAND State CA Zip Code 94618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AT&T Occupation (for Individual) TECHNICAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 19 / 2023  
**Transaction ID : A9761E9E7CA2748885B**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. MCCLEVE, LONNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20523 E. VIA DE PALMAS  
 City QUEEN CREEK State AZ Zip Code 85142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GREENFIELD LAN DEV Occupation (for Individual) DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : AFBCE6E21D4BE416E8F9**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. MCCLUNG, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13 SOLANA RD  
 City PONTE VEDRA BEACCH State FL Zip Code 33282  
 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 ▼ 250.00

Date of Receipt 10 / 18 / 2023  
**Transaction ID : AFD593D63D55F4F0B9B2**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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 22 OF 54
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

**A. MOHOLLAND, BARBARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 ALDERWOOD DRIVE  
 City STAFFORD State VA Zip Code 22556  
 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 ▼ 250.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : AF80156938D3346E7AF9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. NASH, DON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 725 LAKE FOREST DRIVE  
 City LAKE OSWEGO State OR Zip Code 97034  
 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 ▼ 1000.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : AE84DF4E2F4CD44BA9AA**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. NEFF, CHRIS K, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 94453 HOKUILI ST  
 City MILILANI State HI Zip Code 96789  
 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 ▼ 500.00

Date of Receipt 10 / 20 / 2023  
**Transaction ID : ADBC359C599FE4CA3A5D**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. NEFF, ED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5807 VAN ALLEN  
 City CARLSBAD State CA Zip Code 92008  
 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 ▼ 500.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : ACFC29CD85BB94BF7A1/**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. NELLIS, PAMELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 2527  
 City HIGHLANDS State NC Zip Code 28741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2023  
**Transaction ID : AE67F6493C19E40CB898**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. NYQUIST, LINDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 280 DIANNA DR  
 City PROSPER State TX Zip Code 75078  
 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 ▼ 250.00

Date of Receipt 10 / 16 / 2023  
**Transaction ID : A869E933D025E42899D7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<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 24 OF 54
(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**

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

Mailing Address 1570 BLUEWATER RUN

City CHULUOTA	State FL	Zip Code 32766
------------------	-------------	-------------------

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 ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2023

**Transaction ID : A0E5B6E4EEF0F48B086D**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 4371 WOODY CREEK LN

City FORT COLLINS	State CO	Zip Code 80524
----------------------	-------------	-------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2023

**Transaction ID : A82008B68B0734B46BA6**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 5100 BELLWOOD WAY

City CARMICHAEL	State CA	Zip Code 95608
--------------------	-------------	-------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2023

**Transaction ID : A8B2E8F53450D4B6EB86**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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 25 OF 54  
(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. PARK, WILLIAM, , ,**

Mailing Address **P O BOX 718**

City **SKIATOOK** State **OK** Zip Code **74070**

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

Name of Employer (for Individual) **SELF** Occupation (for Individual) **WORK**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**10 / 19 / 2023**

**Transaction ID : A131674FF616B46BF880**

Amount of Each Receipt this Period  
**250.00**

Memo Item

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

Mailing Address **4115 E. CLOCKTOWER LANE, APT. 246**

City **MERIDIAN** State **ID** Zip Code **83642**

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 ▼ **210.00**

Date of Receipt  
**10 / 19 / 2023**

**Transaction ID : AD2C9CD4B42A0442CBB5**

Amount of Each Receipt this Period  
**10.00**

Memo Item

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

Mailing Address **4115 E. CLOCKTOWER LANE, APT. 246**

City **MERIDIAN** State **ID** Zip Code **83642**

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 ▼ **210.00**

Date of Receipt  
**10 / 19 / 2023**

**Transaction ID : A5E658441438D4AB2A23**

Amount of Each Receipt this Period  
**10.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **270.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 OF 54  
(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. PRESLEY, JUANITA, , ,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City MERIDIAN State ID Zip Code 83642

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 ▼ 210.00

Date of Receipt 10 / 19 / 2023  
**Transaction ID : A7D402B954FB84247922**

Amount of Each Receipt this Period 10.00

Memo Item

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

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City MERIDIAN State ID Zip Code 83642

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 ▼ 210.00

Date of Receipt 10 / 19 / 2023  
**Transaction ID : A777566AA596D45E5A36**

Amount of Each Receipt this Period 10.00

Memo Item

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

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City MERIDIAN State ID Zip Code 83642

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 ▼ 210.00

Date of Receipt 10 / 19 / 2023  
**Transaction ID : A656D1D213F1B487ABD9**

Amount of Each Receipt this Period 10.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 54  
(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. PRESLEY, JUANITA, , ,**

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City MERIDIAN	State ID	Zip Code 83642
------------------	----------	-------------------

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 ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2023

**Transaction ID : A6F3752B1AA714930A5B**

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City MERIDIAN	State ID	Zip Code 83642
------------------	----------	-------------------

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 ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2023

**Transaction ID : AE81BFE7128614001A49**

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 4115 E. CLOCKTOWER LANE, APT. 246

City MERIDIAN	State ID	Zip Code 83642
------------------	----------	-------------------

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 ▼  
230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2023

**Transaction ID : AC192FAEE7B2347D6822**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 54  
(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. PRESLEY, JUANITA, , ,**

Mailing Address **4115 E. CLOCKTOWER LANE, APT. 246**

City <b>MERIDIAN</b>	State ID <b></b>	Zip Code <b>83642</b>
-------------------------	---------------------	--------------------------

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

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

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**230.00**

Date of Receipt  
**10 / 20 / 2023**

**Transaction ID : A7D235D51F6444AC18B3**

Amount of Each Receipt this Period  
**10.00**

Memo Item

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

Mailing Address **9611 DEAN ROAD**

City <b>VERMILION</b>	State <b>OH</b>	Zip Code <b>44089</b>
--------------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**10 / 17 / 2023**

**Transaction ID : AEDB323CC7A424F49A5C**

Amount of Each Receipt this Period  
**500.00**

Memo Item

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

Mailing Address **17318 ELVERSON OAKS DRIVE**

City <b>TOMBALL</b>	State <b>TX</b>	Zip Code <b>77377</b>
------------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary    General  
 Other (specify)

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**10 / 17 / 2023**

**Transaction ID : ABC70FFC3D3D94D2A8C5**

Amount of Each Receipt this Period  
**100.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>610.00</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:	PAGE 29 OF 54
(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. SCOTKA, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 GENE PERRY COURT  
 City BARTONVILLE State TX Zip Code 76226  
 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 ▼ 250.00

Date of Receipt 10 / 18 / 2023  
**Transaction ID : A3C34B600F9404C958BE**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. SHEPHERD, ASHMA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1926 INNWOOD RD NE  
 City ATLANTA State GA Zip Code 30329  
 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 ▼ 250.00

Date of Receipt 10 / 18 / 2023  
**Transaction ID : A6D995A229B18418FA54**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. SKLUEFF, M. H., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 823 WINDCREST DRIVE  
 City CARLSBAD State CA Zip Code 92011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STATE OF CA Occupation (for Individual) GOVT INVESTIGATOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 19 / 2023  
**Transaction ID : AC0F3E3C99EBF40F2992**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. SNIDER, CAROLE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 LOCH RIDGE CT.

City GREENSBORO	State NC	Zip Code 27408
--------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INTERIOR DESIGNER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2023

**Transaction ID : A3D78DF0D83B44DAEA52**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 4119 TOWNER ST

City MUSKEGON	State MI	Zip Code 49444
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2023

**Transaction ID : A3B25D4B572A54240ABF**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 33575 DREAMCATCHER TRAIL

City STEAMBOAT SPRINGS	State CO	Zip Code 80487
---------------------------	-------------	-------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2023

**Transaction ID : ADFAC98CAADE544DFB8E**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<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 31 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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. STIGLITZ, MARILYN, , ,**

Mailing Address **232 BALTUSROL WAY**

City <b>SPRINGFIELD</b>	State <b>NJ</b>	Zip Code <b>07081</b>
----------------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2023

**Transaction ID : A6884EEB651074AF0833**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

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

Mailing Address **6715 W. SWEETWATER AVE**

City <b>PEORIA</b>	State <b>AZ</b>	Zip Code <b>85381</b>
-----------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2023

**Transaction ID : A644DABD78F884E7C9F5**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

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

Mailing Address **1620 FAIRFIELD CIR**

City <b>GREENFIELD</b>	State <b>IN</b>	Zip Code <b>46140</b>
---------------------------	--------------------	--------------------------

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

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

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
12	/	19	/	2023

**Transaction ID : A1FC44909EB9B4FDA855**

Amount of Each Receipt this Period  

100.00
--------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>600.00</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:	PAGE 32 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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. VERNON, DK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1116 PROSPECT AVE  
 City HERMOSA BESCH State CA Zip Code 90254  
 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 ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2023  
**Transaction ID : A1D7546966FC44455B87**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. VERNON, DK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1116 PROSPECT AVE  
 City HERMOSA BESCH State CA Zip Code 90254  
 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 ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2023  
**Transaction ID : AE000F41D565E44478B1**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. WACK, JON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1602 WASHINGTON ST  
 City CALISTOGA State CA Zip Code 94515  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2023  
**Transaction ID : AAC748AEF8622440D9AC**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<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 33 OF 54
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

**A. WAGNER, SR., BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3423, RIVIERE DU CHIEN LOOP S  
 City MOBILE State AL Zip Code 36693  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CLEARBROOK LLC Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3300.00**

Date of Receipt **10 / 17 / 2023**  
**Transaction ID : A620C7E716E3C4D2283D**  
 Amount of Each Receipt this Period **3300.00**  
 Memo Item

**B. WENDLING, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2815 CORTE ESERALDA  
 City SAN CLEMENTE State CA Zip Code 92673  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CUSTOM INGREDIENTS, INC. Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 17 / 2023**  
**Transaction ID : ABC3809C6E6674EF99E0**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

**C. WOOD, CHARLES B, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1469 ROCKVILLE ROAD  
 City FAIRFIELD State CA Zip Code 94534  
 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 **250.00**

Date of Receipt **10 / 17 / 2023**  
**Transaction ID : A578141C931F44C5BB8E**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **3800.00**  
**TOTAL** This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 34 OF 54
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

**A. YOUNG, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2207 RIDGEWAY ST. SW  
 City ARDMORE State OK Zip Code 73401  
 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 ▼ 500.00

Date of Receipt 10 / 16 / 2023  
**Transaction ID : A12653E12C1884DCD8E2**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. YOUNG, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2207 RIDGEWAY ST. SW  
 City ARDMORE State OK Zip Code 73401  
 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 ▼ 500.00

Date of Receipt 10 / 16 / 2023  
**Transaction ID : A13593DB8A9CA44583947**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. YOUNG, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2207 RIDGEWAY ST. SW  
 City ARDMORE State OK Zip Code 73401  
 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 ▼ 550.00

Date of Receipt 10 / 17 / 2023  
**Transaction ID : AF255DDA851454414B91**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	46240.00

**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 35 OF 54
<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. IHEARTMEDIA INC. PAC**

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

Mailing Address 20880 STONE OAK PKWY

City SAN ANTONIO	State TX	Zip Code 78258-7460
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00279216

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2023

**Transaction ID : AAF8621E2A8524D88BD6**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B. KOCH INDUSTRIES, INC. POLITICAL ACTION COMMITTEE (KOCHPAC)**

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

Mailing Address 600 14TH STREET, NW  
SUITE 800

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

FEC ID number of contributing federal political committee. **C** C00236489

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
12	/	31	/	2023

**Transaction ID : A2EC4C289CA7B473EB92**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. 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
--------------------	-------------	-------------------

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
10	/	30	/	2023

**Transaction ID : ACFDBDF642BD5434EBC9**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<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 36 OF 54  
(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**

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

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

City ALEXANDRIA State VA Zip Code 22314

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 31 / 2023  
**Transaction ID : A6439B00C23D54965A74**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 22 / 2023  
**Transaction ID : AFB4D65B23E3E48EF8FF**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. TZEDEK PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 62 RUTLEDGE ST  
STE 107

City BROOKLYN State NY Zip Code 11249-7905

FEC ID number of contributing federal political committee. **C** C00770511

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 31 / 2023  
**Transaction ID : A7A12B4628B5E48C8983**

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).....	27000.00

**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 37 OF 54
<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. TEAM JORDAN**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 909

City MARYSVILLE	State OH	Zip Code 43040
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00857615

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2023

**Transaction ID : AA5EF8234C50545EF85B**

Amount of Each Receipt this Period  
7700.00

Memo Item  
**TRANSFER FROM AUTHORIZED COMMITTEE**

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

Mailing Address PO BOX 355

City DELAWARE	State OH	Zip Code 43015
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00416594

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
12		19		2023

**Transaction ID : AABA15484E0F448BDBC1**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 12500 SAN PEDRO AVE  
STE 404

City SAN ANTONIO	State TX	Zip Code 78216
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2023

**Transaction ID : A3DEC4ADA0E744CC8BAF**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7700.00
<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 38 OF 54	
(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  
FRANKLIN, CHARLOTTE, , ,

Mailing Address 12500 SUITE 500

City SAN ANTONIO	State TX	Zip Code 78216
---------------------	-------------	-------------------

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
12		31		2023

**Transaction ID : A079BFB19BBFE42B6A54**

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  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7700.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 5555 HILTON AVE

City **BATON ROUGE** State **LA** Zip Code **70808**

Purpose of Disbursement **CREDIT CARD FEES**  001  
Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
**10 / 31 / 2023**

FEC Identification Number  
**C**  
**Transaction ID : B3BFE83CC9**  
Amount of Each Disbursement this Period  
**80.30**

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 5555 HILTON AVE

City **BATON ROUGE** State **LA** Zip Code **70808**

Purpose of Disbursement **CREDIT CARD FEES**  001  
Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
**12 / 31 / 2023**

FEC Identification Number  
**C**  
**Transaction ID : BD40352E61C**  
Amount of Each Disbursement this Period  
**400.30**

Memo Item

Full Name (Last, First, Middle Initial)

**C. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address P.O. BOX 716045

City **PHILADELPHIA** State **PA** Zip Code **19171-6045**

Purpose of Disbursement **DATABASE**  001  
Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
**09 / 21 / 2023**

FEC Identification Number  
**C**  
**Transaction ID : B5E990FC9C**  
Amount of Each Disbursement this Period  
**600.00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... **1080.60**

**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. ARISTOTLE INTERNATIONAL, INC.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	2	3

Mailing Address P.O. BOX 716045

FEC Identification Number

C [REDACTED]

**Transaction ID : B1E51407F9E**  
Amount of Each Disbursement this Period

[REDACTED] 600.00

Memo Item

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement DATABASE  
Candidate Name  
Category/Type 001

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

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL, INC.**

Date of Disbursement

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

Mailing Address P.O. BOX 716045

FEC Identification Number

C [REDACTED]

**Transaction ID : B7890EA04C:**  
Amount of Each Disbursement this Period

[REDACTED] 600.00

Memo Item

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement DATABASE  
Candidate Name  
Category/Type 001

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

Full Name (Last, First, Middle Initial)

**C. ARISTOTLE INTERNATIONAL, INC.**

Date of Disbursement

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

Mailing Address P.O. BOX 716045

FEC Identification Number

C [REDACTED]

**Transaction ID : B3A9A56788**  
Amount of Each Disbursement this Period

[REDACTED] 600.00

Memo Item

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement DATABASE  
Candidate Name  
Category/Type 001

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

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

[REDACTED] 1800.00

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

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**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	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	2	3

FEC Identification Number

C  
**Transaction ID : B7F5584540C**

Amount of Each Disbursement this Period

550.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	2	3

FEC Identification Number

C  
**Transaction ID : B92C5E16247**

Amount of Each Disbursement this Period

550.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	2	3

FEC Identification Number

C  
**Transaction ID : BB5797AF5A**

Amount of Each Disbursement this Period

560.08

Memo Item

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

1660.08

**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. 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	/	D	D	/	Y	Y	Y	Y
10			10			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B926055827A

Amount of Each Disbursement this Period

550.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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	/	D	D	/	Y	Y	Y	Y
11			07			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B99EB53804C

Amount of Each Disbursement this Period

550.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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	/	D	D	/	Y	Y	Y	Y
12			06			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : BA4D4F9438

Amount of Each Disbursement this Period

800.00
--------

Memo Item

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

1900.00
---------

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

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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 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	/	D	D	/	Y	Y	Y	Y
12			08			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B8CDF1F85F

Amount of Each Disbursement this Period

[REDACTED]	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	/	D	D	/	Y	Y	Y	Y
07			19			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B12622403E5

Amount of Each Disbursement this Period

[REDACTED]	7649.56
------------	---------

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	/	D	D	/	Y	Y	Y	Y
07			25			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : BB48CD07A1

Amount of Each Disbursement this Period

[REDACTED]	3000.00
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Memo Item

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

[REDACTED]	11449.56
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**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]	
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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 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

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	7			3	1			2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : BE066FA63C

Amount of Each Disbursement this Period

[REDACTED]	57.98
------------	-------

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	8			1	7			2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : B5695EE6468

Amount of Each Disbursement this Period

[REDACTED]	4024.58
------------	---------

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	8			3	1			2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : BDC163743C

Amount of Each Disbursement this Period

[REDACTED]	180.20
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Memo Item

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

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

[REDACTED]	4262.76
------------	---------

[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. 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
09	/	25	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : B02895BD2C

Amount of Each Disbursement this Period

[REDACTED]	4759.43
------------	---------

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

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
09	/	30	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : BE77BAA7F2

Amount of Each Disbursement this Period

[REDACTED]	53.27
------------	-------

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

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
10	/	16	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : B33003D900

Amount of Each Disbursement this Period

[REDACTED]	3702.58
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Memo Item

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

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

[REDACTED]	8515.28
------------	---------

[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. 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	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : BF627E73FD

Amount of Each Disbursement this Period

[REDACTED]	110.00
------------	--------

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	/	D	D	/	Y	Y	Y	Y
10			31			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B6B43552B8

Amount of Each Disbursement this Period

[REDACTED]	121048.29
------------	-----------

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	/	D	D	/	Y	Y	Y	Y
11			09			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B18FDAC12

Amount of Each Disbursement this Period

[REDACTED]	40135.25
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Memo Item

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

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

[REDACTED]	161293.54
------------	-----------

[REDACTED]	
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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 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

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State:  District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2023			

FEC Identification Number

**Transaction ID : B9DA09B5C3**

Amount of Each Disbursement this Period

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

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State:  District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2023			

FEC Identification Number

**Transaction ID : BBDD831B41**

Amount of Each Disbursement this Period

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

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State:  District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2023			

FEC Identification Number

**Transaction ID : B078016FB8**

Amount of Each Disbursement this Period

Memo Item

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

**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 with checkboxes for line numbers 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. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA

State VA

Zip Code 22314-3109

Purpose of Disbursement DIGITAL CONSULTING

Category/Type 001

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date: 12 / 28 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : B9652497441

Amount of Each Disbursement this Period

183.00

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

Category/Type 001

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date: 12 / 31 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : BDC365812B

Amount of Each Disbursement this Period

1343.64

Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 SHADY GROVE RD S

City MEMPHIS

State TN

Zip Code 38120-4117

Purpose of Disbursement SHIPPING & POSTAGE

Category/Type 001

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date: 08 / 30 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : B0DCAB2F6

Amount of Each Disbursement this Period

199.95

Memo Item

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

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

1726.59

[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 with checkboxes for line numbers 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. 21b is checked.

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

Form A: FEDEX. Includes fields for Date of Disbursement (11/27/2023), Mailing Address (942 SHADY GROVE RD S), City (MEMPHIS), State (TN), Zip Code (38120-4117), Purpose of Disbursement (SHIPPING AND POSTAGE), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (159.95).

Form B: QUICKBOOKS. Includes fields for Date of Disbursement (08/07/2023), Mailing Address (2700 COAST AVE HQ), City (MOUNTAIN VIEW), State (CA), Zip Code (94043-1140), Purpose of Disbursement (SOFTWARE SUBSCRIPTION), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (110.00).

Form C: QUICKBOOKS. Includes fields for Date of Disbursement (09/18/2023), Mailing Address (2700 COAST AVE HQ), City (MOUNTAIN VIEW), State (CA), Zip Code (94043-1140), Purpose of Disbursement (SOFTWARE SUBSCRIPTION), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (55.00).

SUBTOTAL of Disbursements This Page (optional) 324.95
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. QUICKBOOKS**

Mailing Address 2700 COAST AVE HQ

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1140

Purpose of Disbursement  
SOFTWARE SUBSCRIPTION

001

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B38631FCE8I

Amount of Each Disbursement this Period

55.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. QUICKBOOKS**

Mailing Address 2700 COAST AVE HQ

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1140

Purpose of Disbursement  
SOFTWARE SUBSCRIPTION

001

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : BBEE6021F

Amount of Each Disbursement this Period

115.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	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)..... ▶

170.00
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198946.22
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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 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. MOONEY FOR SENATE, INC.**

Mailing Address PO BOX 1003

City  
CHARLES TOWN

State  
WV

Zip Code  
25414-0995

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Candidate Name  
MOONEY, ALEXANDER, X, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: WV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2023

FEC Identification Number

C C00828475

Transaction ID : BF50D74291

Amount of Each Disbursement this Period

2900.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. MOONEY FOR SENATE, INC.**

Mailing Address PO BOX 1003

City  
CHARLES TOWN

State  
WV

Zip Code  
25414-0995

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Candidate Name  
MOONEY, ALEXANDER, X, ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: WV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2023

FEC Identification Number

C C00828475

Transaction ID : B51F364B9E1

Amount of Each Disbursement this Period

2100.00
---------

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

M M M	/	D D D	/	Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

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Memo Item

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

5000.00
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**TOTAL** This Period (last page this line number only).....▶

5000.00
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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 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. BRUNER, MILES, , ,**

Mailing Address 2303 26TH STREET SOUTH

City  
ARLINGTON

State  
VA

Zip Code  
22206

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
12			30			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B9EC0CD7A

Amount of Each Disbursement this Period

9.00
------

Memo Item

Full Name (Last, First, Middle Initial)

**B. JACQUES, KELLIE, , ,**

Mailing Address 53 BALDWIN RD

City  
BOSTON

State  
MA

Zip Code  
01821

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
10			31			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : BBF4B1112B

Amount of Each Disbursement this Period

50.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. LI, XIAODAN, , ,**

Mailing Address 512 COLONIAL DRIVE

City  
HILTON HEAD ISLAND

State  
SC

Zip Code  
29926

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
10			31			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : BFA5947243

Amount of Each Disbursement this Period

25.00
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Memo Item

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

84.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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. MARINAN, MARISSA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 919 FLORIDA AVE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2023

FEC Identification Number: C

Transaction ID : B7A320B428

Amount of Each Disbursement this Period: 28.00

Memo Item

**B. MARINAN, MARISSA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 919 FLORIDA AVE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 30 / 2023

FEC Identification Number: C

Transaction ID : BEECF295C8

Amount of Each Disbursement this Period: 1.00

Memo Item

**C. NASH, DON, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 725 LAKE FOREST DRIVE

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement REFUND OF CONTRIBUTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2023

FEC Identification Number: C

Transaction ID : BDB78D3261

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1029.00

**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. PRICE, BRANDON, , ,**

Mailing Address 4600 WASHINGTON BLVD #301

City  
ARLINGTON

State  
VA

Zip Code  
22201

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
12		30		2023

FEC Identification Number

C [ ]

Transaction ID : BA527C6AE9

Amount of Each Disbursement this Period

1.00
------

Memo Item

Full Name (Last, First, Middle Initial)

**B. ULFE, DANIEL, , ,**

Mailing Address 15422 ROSEMONT MANOR DR

City  
HAYMARKET

State  
VA

Zip Code  
20169

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
12		30		2023

FEC Identification Number

C [ ]

Transaction ID : B44FF2167A2

Amount of Each Disbursement this Period

1.00
------

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

M M M	/	D D D	/	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)..... ▶

2.00
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**TOTAL** This Period (last page this line number only)..... ▶

1115.00
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