

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 John Bolton Super PAC

ADDRESS (number and street) 1730 M Street NW Suite 611 Washington DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00542464 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, 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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), 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 07 / 01 / 2017 through 12 / 31 / 2017

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

Signature of Treasurer Hobbs, Cabell, , , [Electronically Filed] Date 01 / 31 / 2018

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

John Bolton Super PAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---|---|
| 6. (a) Cash on Hand January 1, <input type="text" value="2017"/> | <input type="text" value="399017.45"/> | <input type="text" value="399017.45"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="782067.02"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="2256528.90"/> | <input type="text" value="3047405.43"/> |
| (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="3038595.92"/> | <input type="text" value="3446422.88"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="413767.14"/> | <input type="text" value="821594.10"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="2624828.78"/> | <input type="text" value="2624828.78"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

John Bolton Super PAC

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 2256158.00 | 3046158.00 |
| (ii) Unitemized | 363.30 | 1208.28 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 2256521.30 | 3047366.28 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 2256521.30 | 3047366.28 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 10.04 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 7.60 | 29.11 |
| 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)).....▶ | 2256528.90 | 3047405.43 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 2256528.90 | 3047405.43 |

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 | 413767.14 | 821594.10 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 413767.14 | 821594.10 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 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)) .. | 413767.14 | 821594.10 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 413767.14 | 821594.10 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 2256521.30 | 3047366.28 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 2256521.30 | 3047366.28 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 413767.14 | 821594.10 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 10.04 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 413767.14 | 821584.06 |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 80 |
| | <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 |
|-----------------------------|-----------------------------|-----------------------------|

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)
John Bolton Super PAC

A. ALLEN, CARLETON, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1648 DIPLOMAT DRIVE
 City CARROLLTON State TX Zip Code 75006-6847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERITAGE BAG CO. Occupation (for Individual) PRESIDENT/C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2017
Transaction ID : SA11A.189075
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. ANTHONY, JOHN , E., MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 20129
 City HOT SPRINGS State AR Zip Code 71903-0129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANTHONY TIMBERLANDS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2017
Transaction ID : SA11A.207106
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. ARNOTT, ROBERT, D., MR. , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 NEWPORT CENTER DR
 City NEWPORT BEACH State CA Zip Code 92660-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESEARCH AFFILIATES, LLC Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2017
Transaction ID : SA11A.187058
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 45000.00 |
| 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 7 OF 80 |
| | <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)
John Bolton Super PAC

A. AZOULAY, MOSHE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18111 PRESTON RD. #1000
 City DALLAS State TX Zip Code 75252-6099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **12 / 27 / 2017**
Transaction ID : SA11A.201333
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. BARRETT, JONATHAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CLAY STREET STE. 4750
 City HOUSTON State TX Zip Code 77002-4000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMINUS MANAGEMENT Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3008.00

Date of Receipt **09 / 26 / 2017**
Transaction ID : SA11A.191714
 Amount of Each Receipt this Period 3008.00
 Memo Item CONTRIBUTION

C. BYRNE, PATRICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 BITNER ROAD
 City PARK CITY State UT Zip Code 84098-5489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OVERSTOCK.COM Occupation (for Individual) C.E.O.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt **10 / 23 / 2017**
Transaction ID : SA11A.197820
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 28008.00 |
| 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 8 OF 80 |
| | <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)
John Bolton Super PAC

A. DELONG , FREDERICK , JOSEPH , MR. , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1113 VINEYARD SQ

| | | |
|------------------------|-------------|------------------------|
| City JEFFERSON CITY | State MO | Zip Code 65101-3560 |
|------------------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) DELONG'S, INC. | Occupation (for Individual) PRESIDENT |
|---|--|

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 |
| 11 | / | 09 | / | 2017 |

Transaction ID : SA11A.197473

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. DODDRIDGE, WILLIAM, S., MR. ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13562 ISLEWOOD DR

| | | |
|-------------------|-------------|------------------------|
| City ANACORTES | State WA | Zip Code 98221-8597 |
|-------------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) THE JEWELRY EXCHANGE | Occupation (for Individual) PRESIDENT & CEO |
|---|--|

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 |
| 07 | / | 19 | / | 2017 |

Transaction ID : SA11A.178067

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. EPSTEIN, MICHAEL, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5410 EDSON LANE, #300

| | | |
|-------------------|-------------|------------------------|
| City ROCKVILLE | State MD | Zip Code 20852-3155 |
|-------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) WILLOW ASSET MANAGEMENT | Occupation (for Individual) EXECUTIVE |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 13 | / | 2017 |

Transaction ID : SA11A.188546

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 17000.00 |
| 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 9 OF 80 |
| | <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)
John Bolton Super PAC

A. FINDER, LAWRENCE, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4919 WILLIAMS COURT LANE

| | | |
|-----------------|-------------|------------------------|
| City HOUSTON | State TX | Zip Code 77081-2103 |
|-----------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) HAYNES & BOONE, L.L.P. | Occupation (for Individual) ATTORNEY |
|---|---|

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 |
| 08 | / | 25 | / | 2017 |

Transaction ID : SA11A.186676

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 7701 FORSYTH BLVD.

| | | |
|-------------------|-------------|------------------------|
| City ST. LOUIS | State MO | Zip Code 63105-1818 |
|-------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) N/A | Occupation (for Individual) RETIRED |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 09 | / | 2017 |

Transaction ID : SA11A.197471

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. FOX, SAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7701 FORSYTH BLVD.
STE 600

| | | |
|---------------------|-------------|------------------------|
| City SAINT LOUIS | State MO | Zip Code 63105-1875 |
|---------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) HARBOUR GROUP | Occupation (for Individual) FOUNDER |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 25 | / | 2017 |

Transaction ID : SA11A.180544

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 50500.00 |
| 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 10 OF 80 |
| | <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)
John Bolton Super PAC

A. FREEDE, JOSEPHINE, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 NW 39TH ST.
 City OKLAHOMA CITY State OK Zip Code 73118-8414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 12 / 27 / 2017
Transaction ID : SA11A.201332
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

B. FRIEDBERG, BARRY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 E. 71ST STREET
 City NEW YORK State NY Zip Code 10021-5011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRIEDBERG MILSTEIN Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 25 / 2017
Transaction ID : SA11A.186674
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. GOLDSTEIN, ALBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 N. HOYNE
 City CHICAGO State IL Zip Code 60647-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVANT, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 12 / 12 / 2017
Transaction ID : SA11A.200955
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 30000.00 |
| 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 11 OF 80 |
| | <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)
John Bolton Super PAC

A. HIXON, GEORGE, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 E. COMMERCE, #300
 City SAN ANTONIO State TX Zip Code 78205-2947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIXON PROPERTIES, INC. Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 09 / 29 / 2017
Transaction ID : SA11A.190057
 Amount of Each Receipt this Period 30000.00
 Memo Item CONTRIBUTION

B. KADISH, LAWRENCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 JERICHO TURNPIKE
 City OLD WESTBURY State NY Zip Code 11568-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 25 / 2017
Transaction ID : SA11A.186675
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. KOLBER, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 W MADISON ST STE 2340
 City CHCIAGO State IL Zip Code 60602-4919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESIDCO Occupation (for Individual) LEASING EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 25 / 2017
Transaction ID : SA11A.180545
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 135000.00 |
| 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 12 OF 80 |
| | <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)
John Bolton Super PAC

A. LEVY, EDWARD, C., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 SOUTH BATES STREET
 City BIRMINGHAM State MI Zip Code 48009-1955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD C. LEVY COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 18 / 2017
Transaction ID : SA11A.192595
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. LEVY, H., IRWIN, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1601 FORUM PLACE, #500
 City WEST PALM BEACH State FL Zip Code 33401-8103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENVILL RECREATION, INC. Occupation (for Individual) CHAIRMAN EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 27 / 2017
Transaction ID : SA11A.201414
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LEVY, STEVEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 PECKSLAND ROAD
 City GREENWICH State CT Zip Code 06831-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 09 / 01 / 2017
Transaction ID : SA11A.187174
 Amount of Each Receipt this Period 4000.00
 Memo Item CONTRIBUTION

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 29500.00 |
| 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 80 |
| | <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)
John Bolton Super PAC

A. MACDOUGALD, JAMES, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 BEACH DR. NE UNIT 2806
 City ST. PETERSBURG State FL Zip Code 33701-3075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTSHORE VENTURES Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **12 / 27 / 2017**
Transaction ID : SA11A.201334
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. MCCORMICK, RICHARD, D., MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 CHERRY CREEK S. DR. STE. 230
 City DENVER State CO Zip Code 80209-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US WEST INC Occupation (for Individual) CHAIRMAN EMERITUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **08 / 29 / 2017**
Transaction ID : SA11A.187053
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. MERCER, ROBERT, LEROY, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 HARBOR ROAD
 City ST. JAMES State NY Zip Code 11780-1113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RENAISSANCE TECHNOLOGIES Occupation (for Individual) C.E.O.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt **10 / 23 / 2017**
Transaction ID : SA11A.197470
 Amount of Each Receipt this Period 500000.00
 Memo Item CONTRIBUTION

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 535000.00 |
| 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 14 OF 80 |
| | <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)
John Bolton Super PAC

A. MERCER, ROBERT, LEROY, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 HARBOR ROAD
 City ST. JAMES State NY Zip Code 11780-1113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RENAISSANCE TECHNOLOGIES Occupation (for Individual) C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 12 / 28 / 2017
Transaction ID : SA11A.204599
 Amount of Each Receipt this Period 500000.00
 Memo Item CONTRIBUTION

B. PFAUTCH, ROY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 PORTLAND PLACE
 City ST. LOUIS State MO Zip Code 63108-1242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CIVIC SERVICE, INC. Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 09 / 2017
Transaction ID : SA11A.197472
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. REYES, J., CHRISTOPHER, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 S. FLAGLER DR. STE 1500 PHILLIPS POINT WEST TOWER
 City WEST PALM BEACH State FL Zip Code 33401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REYES HOLDINGS, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 21 / 2017
Transaction ID : SA11A.190800
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 535000.00 |
| 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 15 OF 80 |
| | <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)
John Bolton Super PAC

A. ROBSON, EDWARD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9532 E. RIGGS
 City SUN LAKES State AZ Zip Code 85248-7463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBSON COMMUNITIES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2017
Transaction ID : SA11A.201415
 Amount of Each Receipt this Period
 15000.00
 Memo Item
 CONTRIBUTION

B. SENNETT, DAVID, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 WOLF RD
 City WESTERN SPRINGS State IL Zip Code 60558-1818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGIC SOLUTIONS INC. Occupation (for Individual) VICE PRESIDENT SYSTEMS
 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
 11 / 17 / 2017
Transaction ID : SA11A.198903
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. STEPHENS, WARREN, A., MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 CENTER ST. SUITE 200
 City LITTLE ROCK State AR Zip Code 72201-4404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS, INC. Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2017
Transaction ID : SA11A.200988
 Amount of Each Receipt this Period
 250000.00
 Memo Item
 CONTRIBUTION

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 266000.00 |
| 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 16 OF 80 |
| | <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)
John Bolton Super PAC

A. STONE, ROGER, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 SKOKIE BLVD. SUITE 300

| | | |
|--------------------|-------------|------------------------|
| City NORTHBROOK | State IL | Zip Code 60062-4124 |
|--------------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) KAPSTONE PAPER/PACKAGING CORP. | Occupation (for Individual) CHAIRMAN/CEO |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : SA11A.201193

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. TIGAY, EYTAN, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 88 FRANKLIN STREET SUITE 2

| | | |
|------------------|-------------|--------------------|
| City NEW YORK | State NY | Zip Code 10013- |
|------------------|-------------|--------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) RHONE GROUP | Occupation (for Individual) MANAGING DIRECTOR |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 20 | | 2017 |

Transaction ID : SA11A.201241

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. UIHLEIN, RICHARD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1396 N. WAUKEGAN ROAD

| | | |
|---------------------|-------------|------------------------|
| City LAKE FOREST | State IL | Zip Code 60045-1147 |
|---------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ULINE | Occupation (for Individual) C.E.O./OWNER |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 29 | | 2017 |

Transaction ID : SA11A.187052

Amount of Each Receipt this Period
500000.00

Memo Item
CONTRIBUTION

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 535000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 80 |
| | <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)
John Bolton Super PAC

A. WHITE, ALAN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2323 VICTORY AVE
SUITE 1400

City DALLAS State TX Zip Code 75219-7695

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

Name of Employer (for Individual) HILLTOP HOLDINGS Occupation (for Individual) CO-CEO & VICE CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 08 / 2017
Transaction ID : SA11A.182959

Amount of Each Receipt this Period 50000.00

Memo Item CONTRIBUTION

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

Mailing Address 55 CRESCENT LAKE BLVD

City ANNISTON State AL Zip Code 36207-4270

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

Name of Employer (for Individual) KALLIES LLC Occupation (for Individual) CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 05 / 2017
Transaction ID : SA11A.183167

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

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

Mailing Address 55 CRESCENT LAKE BLVD

City ANNISTON State AL Zip Code 36207-4270

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

Name of Employer (for Individual) KALLIES LLC Occupation (for Individual) CEO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2017
Transaction ID : SA11A.187882

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 50050.00 |
| 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 18 OF 80 |
| | <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)
John Bolton Super PAC

A. WINNER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 CRESCENT LAKE BLVD
 City ANNISTON State AL Zip Code 36207-4270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALLIES LLC Occupation (for Individual) CEO
 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
 09 / 05 / 2017
Transaction ID : SA11A.190752
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WINNER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 CRESCENT LAKE BLVD
 City ANNISTON State AL Zip Code 36207-4270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALLIES LLC Occupation (for Individual) CEO
 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 / 05 / 2017
Transaction ID : SA11A.190753
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WINNER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 CRESCENT LAKE BLVD
 City ANNISTON State AL Zip Code 36207-4270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALLIES LLC Occupation (for Individual) CEO
 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
 11 / 05 / 2017
Transaction ID : SA11A.200326
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 75.00 |
| 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 19 OF 80 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINNER, ROSS, , ,

Mailing Address **55 CRESCENT LAKE BLVD**

| | | |
|-------------------------|--------------------|-------------------------------|
| City ANNISTON | State AL | Zip Code 36207-4270 |
|-------------------------|--------------------|-------------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) KALLIES LLC | Occupation (for Individual) CEO |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 09 / 2017

Transaction ID : SA11A.204930

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

| | |
|--|-------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 25.00 |
| TOTAL This Period (last page this line number only).....▶ | 2256158.00 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

| | | | |
|---|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial) A. FLAVIN, KATHY, , , | | Date of Disbursement MM / DD / YYYY 10 / 13 / 2017 | |
| Mailing Address 1730 M STREET NW STE 611 | | FEC Identification Number C [] Transaction ID : SB.78 Amount of Each Disbursement this Period [] 2042.92 | |
| City WASHINGTON | State DC | Zip Code 20036 | Category/ Type [] |
| Purpose of Disbursement PAYROLL | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |
| State: District: | | | |

| | | | |
|---|--|--|------------------------------------|
| Full Name (Last, First, Middle Initial) B. FLAVIN, KATHY, , , | | Date of Disbursement MM / DD / YYYY 10 / 16 / 2017 | |
| Mailing Address 1730 M STREET NW STE 611 | | FEC Identification Number C [] Transaction ID : SB.79 Amount of Each Disbursement this Period [] 961.51 | |
| City WASHINGTON | State DC | Zip Code 20036 | Category/ Type [] |
| Purpose of Disbursement PAYROLL | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |
| State: District: | | | |

| | | | |
|---|--|--|------------------------------------|
| Full Name (Last, First, Middle Initial) C. FLAVIN, KATHY, , , | | Date of Disbursement MM / DD / YYYY 10 / 27 / 2017 | |
| Mailing Address 1730 M STREET NW STE 611 | | FEC Identification Number C [] Transaction ID : SB.80 Amount of Each Disbursement this Period [] 961.51 | |
| City WASHINGTON | State DC | Zip Code 20036 | Category/ Type [] |
| Purpose of Disbursement PAYROLL | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |
| State: District: | | | |

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

3965.94

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 |

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)
John Bolton Super PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. FLAVIN, KATHY, , , | | Date of Disbursement MM / DD / YYYY 11 / 10 / 2017 |
| Mailing Address 1730 M STREET NW STE 611 | | FEC Identification Number C Transaction ID : SB.81 Amount of Each Disbursement this Period 961.51 |
| City WASHINGTON | State DC | |
| Purpose of Disbursement PAYROLL | Zip Code 20036 | Memo Item <input type="checkbox"/> |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. FLAVIN, KATHY, , , | | Date of Disbursement MM / DD / YYYY 11 / 27 / 2017 |
| Mailing Address 1730 M STREET NW STE 611 | | FEC Identification Number C Transaction ID : SB.82 Amount of Each Disbursement this Period 1047.43 |
| City WASHINGTON | State DC | |
| Purpose of Disbursement PAYROLL | Zip Code 20036 | Memo Item <input type="checkbox"/> |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. FLAVIN, KATHY, , , | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2017 |
| Mailing Address 1730 M STREET NW STE 611 | | FEC Identification Number C Transaction ID : SB.83 Amount of Each Disbursement this Period 1047.43 |
| City WASHINGTON | State DC | |
| Purpose of Disbursement PAYROLL | Zip Code 20036 | Memo Item <input type="checkbox"/> |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 3056.37 |
| 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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. FLAVIN, KATHY, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 2 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C []

Transaction ID : **SB.84**

Amount of Each Disbursement this Period

[] 1047.43

Memo Item

Full Name (Last, First, Middle Initial)

B. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 0 | 6 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C []

Transaction ID : **SB.19**

Amount of Each Disbursement this Period

[] 861.84

Memo Item

Full Name (Last, First, Middle Initial)

C. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 2 | 0 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C []

Transaction ID : **SB.20**

Amount of Each Disbursement this Period

[] 1081.40

Memo Item

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

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

[] 2990.67

[]

**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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

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 | 4 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.21

Amount of Each Disbursement this Period

[] 1081.38

Memo Item

Full Name (Last, First, Middle Initial)

B. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

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 | | 1 | 8 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.22

Amount of Each Disbursement this Period

[] 1081.38

Memo Item

Full Name (Last, First, Middle Initial)

C. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

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 | | 0 | 1 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.23

Amount of Each Disbursement this Period

[] 1081.38

Memo Item

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

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

[] 3244.14

[]

**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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2017

FEC Identification Number

C

Transaction ID : SB.24

Amount of Each Disbursement this Period

1081.38

Memo Item

Full Name (Last, First, Middle Initial)

B. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number

C

Transaction ID : SB.25

Amount of Each Disbursement this Period

1081.38

Memo Item

Full Name (Last, First, Middle Initial)

C. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2017

FEC Identification Number

C

Transaction ID : SB.26

Amount of Each Disbursement this Period

1081.38

Memo Item

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

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

3244.14

**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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 11 | | | 10 | | | 2017 | | | | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.27

Amount of Each Disbursement this Period

[REDACTED] 1081.38

Memo Item

Full Name (Last, First, Middle Initial)

B. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 11 | | | 27 | | | 2017 | | | | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.28

Amount of Each Disbursement this Period

[REDACTED] 1081.39

Memo Item

Full Name (Last, First, Middle Initial)

C. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 12 | | | 08 | | | 2017 | | | | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.29

Amount of Each Disbursement this Period

[REDACTED] 1081.39

Memo Item

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

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

[REDACTED] 3244.16

[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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PAYROLL

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 21 / 2017

FEC Identification Number: C

Transaction ID : SB.30

Amount of Each Disbursement this Period: 1081.38

Memo Item

Full Name (Last, First, Middle Initial)
B. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PAYROLL

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.100

Amount of Each Disbursement this Period: 2509.64

Memo Item

Full Name (Last, First, Middle Initial)
C. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PAYROLL

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 14 / 2017

FEC Identification Number: C

Transaction ID : SB.101

Amount of Each Disbursement this Period: 2509.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6100.65

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.102

Amount of Each Disbursement this Period

[] 2509.61

Memo Item

Full Name (Last, First, Middle Initial)

B. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 3 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.103

Amount of Each Disbursement this Period

[] 2509.61

Memo Item

Full Name (Last, First, Middle Initial)

C. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 7 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.104

Amount of Each Disbursement this Period

[] 2509.63

Memo Item

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

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

[] 7528.85

[]

**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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 10 / 2017

FEC Identification Number: C

Transaction ID : SB.105

Amount of Each Disbursement this Period: 2509.62

Memo Item

Full Name (Last, First, Middle Initial)
B. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB.106

Amount of Each Disbursement this Period: 2509.62

Memo Item

Full Name (Last, First, Middle Initial)
C. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 08 / 2017

FEC Identification Number: C

Transaction ID : SB.107

Amount of Each Disbursement this Period: 2509.62

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7528.86

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 21 | | | 2017 | | | |

FEC Identification Number

C [REDACTED]

Transaction ID : **SB.108**

Amount of Each Disbursement this Period

[REDACTED] 2509.63

Memo Item

Full Name (Last, First, Middle Initial)

B. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 07 | | | 06 | | | 2017 | | | |

FEC Identification Number

C [REDACTED]

Transaction ID : **SB.96**

Amount of Each Disbursement this Period

[REDACTED] 2509.62

Memo Item

Full Name (Last, First, Middle Initial)

C. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 07 | | | 20 | | | 2017 | | | |

FEC Identification Number

C [REDACTED]

Transaction ID : **SB.97**

Amount of Each Disbursement this Period

[REDACTED] 2509.63

Memo Item

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

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

[REDACTED] 7528.88

[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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

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 | 4 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.98

Amount of Each Disbursement this Period

[] 2509.61

Memo Item

Full Name (Last, First, Middle Initial)

B. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PAYROLL

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 | | 1 | 8 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.99

Amount of Each Disbursement this Period

[] 2509.63

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 6402 ARLINGTON BLVD

City
FALLS CHURCH

State
VA

Zip Code
22042

Purpose of Disbursement
PAYROLL SERVICES

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 | | 2 | 2 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.1

Amount of Each Disbursement this Period

[] 359.70

Memo Item

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

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

[] 5378.94

[]

**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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 29 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.2

Amount of Each Disbursement this Period

[REDACTED] 479.15

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.3

Amount of Each Disbursement this Period

[REDACTED] 11269.55

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.4

Amount of Each Disbursement this Period

[REDACTED] 12517.81

Memo Item

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

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

[REDACTED] 24266.51

[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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 200 VESEY STREET

City
NEW YORK

State
NY

Zip Code
10285

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

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 | | 0 | 5 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.5

Amount of Each Disbursement this Period

[REDACTED] 144.65

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 200 VESEY STREET

City
NEW YORK

State
NY

Zip Code
10285

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

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 |
| 1 | 0 | | 0 | 5 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.6

Amount of Each Disbursement this Period

[REDACTED] 1127.55

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address 200 VESEY STREET

City
NEW YORK

State
NY

Zip Code
10285

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

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 |
| 1 | 1 | | 0 | 6 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.7

Amount of Each Disbursement this Period

[REDACTED] 1589.80

Memo Item

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

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

[REDACTED] 2862.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) A. BB&T | | Date of Disbursement MM / DD / YYYY 09 / 29 / 2017 | |
| Mailing Address 2200 WILSON BLVD | | FEC Identification Number C [] Transaction ID : SB.8 Amount of Each Disbursement this Period [] 69.00 | |
| City ARLINGTON | State VA | Zip Code 22201 | Category/ Type [] |
| Purpose of Disbursement BANK CHARGE | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) B. BB&T | | Date of Disbursement MM / DD / YYYY 12 / 27 / 2017 | |
| Mailing Address 2200 WILSON BLVD | | FEC Identification Number C [] Transaction ID : SB.9 Amount of Each Disbursement this Period [] 88.00 | |
| City ARLINGTON | State VA | Zip Code 22201 | Category/ Type [] |
| Purpose of Disbursement BANK CHARGE | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) C. BB&T - VISA | | Date of Disbursement MM / DD / YYYY 07 / 31 / 2017 | |
| Mailing Address PO BOX 580340 | | FEC Identification Number C [] Transaction ID : SB.896 Amount of Each Disbursement this Period [] 5362.74 | |
| City CHARLOTTE | State NC | Zip Code 28258 | Category/ Type [] |
| Purpose of Disbursement CREDIT CARD PAYMENT | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [] 5519.74 |
| 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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.6656

Amount of Each Disbursement this Period

[REDACTED] 648.20

Memo Item

Full Name (Last, First, Middle Initial)

B. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
AGENT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.6654

Amount of Each Disbursement this Period

[REDACTED] 42.00

Memo Item

Full Name (Last, First, Middle Initial)

C. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
AGENT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.6655

Amount of Each Disbursement this Period

[REDACTED] 42.00

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. MICROSOFT

Mailing Address 15010 NE 36TH ST

City REDMOND State WA Zip Code 98052

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C

Transaction ID : SB.6652

Amount of Each Disbursement this Period

42.30

Memo Item

Full Name (Last, First, Middle Initial)

B. MICROSOFT

Mailing Address 15010 NE 36TH ST

City REDMOND State WA Zip Code 98052

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C

Transaction ID : SB.6653

Amount of Each Disbursement this Period

105.75

Memo Item

Full Name (Last, First, Middle Initial)

C. PMI MONTHLY PARKING

Mailing Address 1227 20TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C

Transaction ID : SB.6663

Amount of Each Disbursement this Period

292.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C
Transaction ID : SB.6662
 Amount of Each Disbursement this Period
 73.22

Memo Item

Full Name (Last, First, Middle Initial)

B. THE RITZ-CARLTON HOTELS

Mailing Address 4445 WILLARD AVENUE, STE. 800

City CHEVY CHASE State MD Zip Code 20815

Purpose of Disbursement TRAVEL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C
Transaction ID : SB.6660
 Amount of Each Disbursement this Period
 1875.28

Memo Item

Full Name (Last, First, Middle Initial)

C. THE RITZ-CARLTON HOTELS

Mailing Address 4445 WILLARD AVENUE, STE. 800

City CHEVY CHASE State MD Zip Code 20815

Purpose of Disbursement TRAVEL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number

C
Transaction ID : SB.6661
 Amount of Each Disbursement this Period
 726.46

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. MICROSOFT

Mailing Address 15010 NE 36TH ST

City REDMOND State WA Zip Code 98052

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB.6670

Amount of Each Disbursement this Period: 42.30

Memo Item

Full Name (Last, First, Middle Initial)
B. PMI MONTHLY PARKING

Mailing Address 1227 20TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB.6665

Amount of Each Disbursement this Period: 292.00

Memo Item

Full Name (Last, First, Middle Initial)
C. PMI MONTHLY PARKING

Mailing Address 1227 20TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB.6666

Amount of Each Disbursement this Period: 292.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

A. PMI MONTHLY PARKING

Full Name (Last, First, Middle Initial)
Mailing Address 1227 20TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2017

FEC Identification Number: C
Transaction ID : SB.6671
Amount of Each Disbursement this Period: 169.55

Memo Item

B. STAPLES

Full Name (Last, First, Middle Initial)
Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2017

FEC Identification Number: C
Transaction ID : SB.6664
Amount of Each Disbursement this Period: 52.93

Memo Item

C. STAPLES

Full Name (Last, First, Middle Initial)
Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2017

FEC Identification Number: C
Transaction ID : SB.6667
Amount of Each Disbursement this Period: 61.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. THE HILL

Mailing Address 1625 K ST NWSUITE 900

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
SUBSCRIPTION

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 | | 2 | 9 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.6668

Amount of Each Disbursement this Period

[REDACTED] 237.94

Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T - VISA

Mailing Address PO BOX 580340

City
CHARLOTTE

State
NC

Zip Code
28258

Purpose of Disbursement
CREDIT CARD PAYMENT

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 |
| 1 | 0 | | 0 | 2 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.898

Amount of Each Disbursement this Period

[REDACTED] 8413.19

Memo Item SUB-VENDORS REQUIRING ITEMIZATION ARE SHOWN

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORT

State
TX

Zip Code
75261

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 9 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB.6680

Amount of Each Disbursement this Period

[REDACTED] 497.20

Memo Item

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

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

[REDACTED] 8413.19

[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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement AGENT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB.6676

Amount of Each Disbursement this Period: 42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement AGENT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB.6679

Amount of Each Disbursement this Period: 42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement AGENT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB.6682

Amount of Each Disbursement this Period: 42.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
AGENT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number

C

Transaction ID : SB.6683

Amount of Each Disbursement this Period

42.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HILLTOP CONSULTANTS

Mailing Address 4201 CONNECTICUT AVENUE NW, STE. 5

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
COMPUTER SERVICES/SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number

C

Transaction ID : SB.6674

Amount of Each Disbursement this Period

623.92

Memo Item

Full Name (Last, First, Middle Initial)

C. MICROSOFT

Mailing Address 15010 NE 36TH ST

City REDMOND State WA Zip Code 98052

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number

C

Transaction ID : SB.6672

Amount of Each Disbursement this Period

42.30

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. MICROSOFT

Mailing Address 15010 NE 36TH ST

City REDMOND State WA Zip Code 98052

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number

C

Transaction ID : SB.6673

Amount of Each Disbursement this Period

105.75

Memo Item

Full Name (Last, First, Middle Initial)

B. PMI MONTHLY PARKING

Mailing Address 1227 20TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PARKING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number

C

Transaction ID : SB.6684

Amount of Each Disbursement this Period

584.00

Memo Item

Full Name (Last, First, Middle Initial)

C. THE RITZ-CARLTON HOTELS

Mailing Address 4445 WILLARD AVENUE, STE. 800

City CHEVY CHASE State MD Zip Code 20815

Purpose of Disbursement TRAVEL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number

C

Transaction ID : SB.6677

Amount of Each Disbursement this Period

1765.01

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. UNITED AIRLINES | | Date of Disbursement MM / DD / YYYY 09 / 29 / 2017 | |
| Mailing Address 233 S. WACKER DR. | | | |
| City CHICAGO | State IL | Zip Code 60606 | |
| Purpose of Disbursement TRAVEL | | <input type="text"/> | |
| Candidate Name | | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | <input checked="" type="checkbox"/> Memo Item | | |

FEC Identification Number

Transaction ID : SB.6675
Amount of Each Disbursement this Period
 3138.41

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. UNITED AIRLINES | | Date of Disbursement MM / DD / YYYY 09 / 29 / 2017 | |
| Mailing Address 233 S. WACKER DR. | | | |
| City CHICAGO | State IL | Zip Code 60606 | |
| Purpose of Disbursement TRAVEL | | <input type="text"/> | |
| Candidate Name | | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | <input checked="" type="checkbox"/> Memo Item | | |

FEC Identification Number

Transaction ID : SB.6678
Amount of Each Disbursement this Period
 992.40

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. UNITED AIRLINES | | Date of Disbursement MM / DD / YYYY 09 / 29 / 2017 | |
| Mailing Address 233 S. WACKER DR. | | | |
| City CHICAGO | State IL | Zip Code 60606 | |
| Purpose of Disbursement TRAVEL | | <input type="text"/> | |
| Candidate Name | | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | <input checked="" type="checkbox"/> Memo Item | | |

FEC Identification Number

Transaction ID : SB.6681
Amount of Each Disbursement this Period
 496.20

| | |
|--|---------------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | <input type="text"/> 0.00 |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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)
John Bolton Super PAC

A. BB&T - VISA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 580340

City CHARLOTTE State NC Zip Code 28258

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB.899

Amount of Each Disbursement this Period: 8113.13

Memo Item SUB-VENDORS REQUIRING ITEMIZATION ARE SHOWN

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement CREDIT-TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB.6686

Amount of Each Disbursement this Period: - 489.20

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB.6693

Amount of Each Disbursement this Period: 978.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8113.13

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6697

Amount of Each Disbursement this Period

489.20

Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement CREDIT - TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6685

Amount of Each Disbursement this Period

- 77.60

Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6692

Amount of Each Disbursement this Period

133.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6700

Amount of Each Disbursement this Period

294.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAREY INTERNATIONAL INC

Mailing Address PO BOX 842350

City BOSTON State MA Zip Code 02284

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6699

Amount of Each Disbursement this Period

1724.26

Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6691

Amount of Each Disbursement this Period

1326.40

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
AGENT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6694

Amount of Each Disbursement this Period

42.00

Memo Item

Full Name (Last, First, Middle Initial)

B. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
AGENT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6695

Amount of Each Disbursement this Period

42.00

Memo Item

Full Name (Last, First, Middle Initial)

C. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
AGENT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6698

Amount of Each Disbursement this Period

42.00

Memo Item

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
AGENT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6706

Amount of Each Disbursement this Period

42.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LOEWS HOTELS

Mailing Address 667 MADISON AVENUE

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6690

Amount of Each Disbursement this Period

1613.82

Memo Item

Full Name (Last, First, Middle Initial)

C. MICROSOFT

Mailing Address 15010 NE 36TH ST

City REDMOND State WA Zip Code 98052

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6704

Amount of Each Disbursement this Period

105.75

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. MICROSOFT

Mailing Address 15010 NE 36TH ST

City REDMOND State WA Zip Code 98052

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6705

Amount of Each Disbursement this Period

42.30

Memo Item

Full Name (Last, First, Middle Initial)

B. PMI MONTHLY PARKING

Mailing Address 1227 20TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6688

Amount of Each Disbursement this Period

584.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6696

Amount of Each Disbursement this Period

59.10

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. STAPLES

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB.6701

Amount of Each Disbursement this Period: 211.49

Memo Item

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

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB.6703

Amount of Each Disbursement this Period: 65.85

Memo Item

Full Name (Last, First, Middle Initial)
C. THE LANGHAM

Mailing Address 400 FIFTH AVENUE

City NEW YORK State NY Zip Code 10018

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB.6702

Amount of Each Disbursement this Period: 1307.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. THE RITZ-CARLTON HOTELS

Mailing Address 4445 WILLARD AVENUE, STE. 800

City CHEVY CHASE State MD Zip Code 20815

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6689

Amount of Each Disbursement this Period

569.01

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 233 S. WACKER DR.

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
CREDIT-TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.6687

Amount of Each Disbursement this Period

- 992.40

Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T - VISA

Mailing Address PO BOX 580340

City CHARLOTTE State NC Zip Code 28258

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

FEC Identification Number

C

Transaction ID : SB.900

Amount of Each Disbursement this Period

13694.58

Memo Item SUB-VENDORS REQUIRING ITEMIZATION ARE SHOWN

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

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

13694.58

**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)
John Bolton Super PAC

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.6715

Amount of Each Disbursement this Period: 474.20

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 619616

City DFW AIRPORT State TX Zip Code 75261

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.6721

Amount of Each Disbursement this Period: 1033.20

Memo Item

C. CAREY INTERNATIONAL INC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 842350

City BOSTON State MA Zip Code 02284

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.6713

Amount of Each Disbursement this Period: 201.27

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

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|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. CAREY INTERNATIONAL INC

Mailing Address PO BOX 842350

City BOSTON State MA Zip Code 02284

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.6714

Amount of Each Disbursement this Period: 154.75

Memo Item

Full Name (Last, First, Middle Initial)
B. CAREY INTERNATIONAL INC

Mailing Address PO BOX 842350

City BOSTON State MA Zip Code 02284

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.6720

Amount of Each Disbursement this Period: 1259.36

Memo Item

Full Name (Last, First, Middle Initial)
C. CAREY INTERNATIONAL INC

Mailing Address PO BOX 842350

City BOSTON State MA Zip Code 02284

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.6724

Amount of Each Disbursement this Period: 2218.27

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. DELTA AIRLINES | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2017 |
| Mailing Address 1030 DELTA BLVD. | | FEC Identification Number C [] Transaction ID : SB.6719 Amount of Each Disbursement this Period [] 1739.20 |
| City ATLANTA | State GA | Zip Code 30320 |
| Purpose of Disbursement TRAVEL | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: [] District: [] | <input checked="" type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. EXECUTIVE TRAVEL | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2017 |
| Mailing Address 1333 NEW HAMPSHIRE AVE., NW | | FEC Identification Number C [] Transaction ID : SB.6717 Amount of Each Disbursement this Period [] 42.00 |
| City WASHINGTON | State DC | Zip Code 20036 |
| Purpose of Disbursement AGENT FEE | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: [] District: [] | <input checked="" type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. EXECUTIVE TRAVEL | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2017 |
| Mailing Address 1333 NEW HAMPSHIRE AVE., NW | | FEC Identification Number C [] Transaction ID : SB.6718 Amount of Each Disbursement this Period [] 42.00 |
| City WASHINGTON | State DC | Zip Code 20036 |
| Purpose of Disbursement AGENT FEE | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: [] District: [] | <input checked="" type="checkbox"/> Memo Item | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [] 0.00 |
| TOTAL This Period (last page this line number only).....▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. EXECUTIVE TRAVEL

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
AGENT FEE

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 | | | 01 | | | 2017 | | | |

FEC Identification Number

C

Transaction ID : SB.6725

Amount of Each Disbursement this Period

42.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARRIOTT

Mailing Address 10400 FERNWOOD ROAD

City
BETHESDA

State
MD

Zip Code
20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2017 | | | |

FEC Identification Number

C

Transaction ID : SB.6729

Amount of Each Disbursement this Period

335.96

Memo Item

Full Name (Last, First, Middle Initial)

C. MICROSOFT

Mailing Address 15010 NE 36TH ST

City
REDMOND

State
WA

Zip Code
98052

Purpose of Disbursement
OFFICE SUPPLIES

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 | | | 01 | | | 2017 | | | |

FEC Identification Number

C

Transaction ID : SB.6708

Amount of Each Disbursement this Period

42.30

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. MICROSOFT

Mailing Address 15010 NE 36TH ST

City
REDMOND

State
WA

Zip Code
98052

Purpose of Disbursement
OFFICE SUPPLIES

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 | | | 01 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : **SB.6709**

Amount of Each Disbursement this Period

[] 105.75 []

Memo Item

Full Name (Last, First, Middle Initial)

B. MICROSOFT

Mailing Address 15010 NE 36TH ST

City
REDMOND

State
WA

Zip Code
98052

Purpose of Disbursement
OFFICE SUPPLIES

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 | | | 01 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : **SB.6727**

Amount of Each Disbursement this Period

[] 42.30 []

Memo Item

Full Name (Last, First, Middle Initial)

C. MICROSOFT

Mailing Address 15010 NE 36TH ST

City
REDMOND

State
WA

Zip Code
98052

Purpose of Disbursement
OFFICE SUPPLIES

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 | | | 01 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : **SB.6728**

Amount of Each Disbursement this Period

[] 105.75 []

Memo Item

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

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

[] 0.00 []

[] [] [] [] [] [] [] [] [] []

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. PMI MONTHLY PARKING

Mailing Address 1227 20TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2017 | | | |

FEC Identification Number

C

Transaction ID : SB.6711

Amount of Each Disbursement this Period

584.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 500 STAPLES DRIVE

City
FRAMINGHAM

State
MA

Zip Code
01702

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2017 | | | |

FEC Identification Number

C

Transaction ID : SB.6723

Amount of Each Disbursement this Period

36.92

Memo Item

Full Name (Last, First, Middle Initial)

C. THE RITZ-CARLTON HOTELS

Mailing Address 4445 WILLARD AVENUE, STE. 800

City
CHEVY CHASE

State
MD

Zip Code
20815

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2017 | | | |

FEC Identification Number

C

Transaction ID : SB.6710

Amount of Each Disbursement this Period

2124.67

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2017

FEC Identification Number

C

Transaction ID : SB.12

Amount of Each Disbursement this Period

5175.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2017

FEC Identification Number

C

Transaction ID : SB.13

Amount of Each Disbursement this Period

5175.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2017

FEC Identification Number

C

Transaction ID : SB.14

Amount of Each Disbursement this Period

5175.00

Memo Item

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

15525.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB.15

Amount of Each Disbursement this Period: 10350.00

Memo Item

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

Mailing Address 1593 SPRING HILL ROAD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATA MANAGEMENT SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB.31

Amount of Each Disbursement this Period: 2500.00

Memo Item

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

Mailing Address 1593 SPRING HILL ROAD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATA MANAGEMENT SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB.32

Amount of Each Disbursement this Period: 150.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 04 | | 2017 |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB.33

Amount of Each Disbursement this Period

| |
|---------|
| 3515.90 |
|---------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. CMDI

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 05 | | 2017 |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB.34

Amount of Each Disbursement this Period

| |
|---------|
| 3516.02 |
|---------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. CMDI

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 11 | | 16 | | 2017 |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB.35

Amount of Each Disbursement this Period

| |
|---------|
| 1025.71 |
|---------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

| |
|---------|
| 8057.63 |
|---------|

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 07 | | | 2017 | | | |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

FEC Identification Number

C []

Transaction ID : SB.36

Amount of Each Disbursement this Period

[] 1025.38

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. CMDI

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 09 | | | 06 | | | 2017 | | | |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

FEC Identification Number

C []

Transaction ID : SB.37

Amount of Each Disbursement this Period

[] 40.30

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. CMDI

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 09 | | | 20 | | | 2017 | | | |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

FEC Identification Number

C []

Transaction ID : SB.38

Amount of Each Disbursement this Period

[] 350.60

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

[] 1416.28

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.39

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.40

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.41

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)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 2 | 9 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.42

Amount of Each Disbursement this Period

[] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 8 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.43

Amount of Each Disbursement this Period

[] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 3 | 1 | | 2 | 0 | 1 | 7 |

FEC Identification Number

C []

Transaction ID : SB.44

Amount of Each Disbursement this Period

[] 2500.00

Memo Item

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

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

[] 7500.00

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 30 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : SB.45

Amount of Each Disbursement this Period

[] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CONNELL DONATELLI INC

Mailing Address PO BOX 1877

City
ALEXANDRIA

State
VA

Zip Code
22313

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 02 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : SB.46

Amount of Each Disbursement this Period

[] 3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CONNELL DONATELLI INC

Mailing Address PO BOX 1877

City
ALEXANDRIA

State
VA

Zip Code
22313

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 16 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : SB.47

Amount of Each Disbursement this Period

[] 4000.00

Memo Item

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

[] 9500.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CONNELL DONATELLI INC

Mailing Address PO BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 07 / 2017

FEC Identification Number

C

Transaction ID : SB.48

Amount of Each Disbursement this Period

4000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. EAGLE BANK

Mailing Address 1425 K STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BANK CHARGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 06 / 2017

FEC Identification Number

C

Transaction ID : SB.49

Amount of Each Disbursement this Period

55.00

Memo Item

Full Name (Last, First, Middle Initial)

C. EAGLE BANK

Mailing Address 1425 K STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BANK CHARGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB.50

Amount of Each Disbursement this Period

55.00

Memo Item

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

4110.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. EAGLE BANK

Date of Disbursement
MM / DD / YYYY
09 / 06 / 2017

Mailing Address 1425 K STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement BANK CHARGE

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : SB.51
Amount of Each Disbursement this Period
55.00

Memo Item

Full Name (Last, First, Middle Initial)
B. EAGLE BANK

Date of Disbursement
MM / DD / YYYY
10 / 06 / 2017

Mailing Address 1425 K STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement BANK CHARGE

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : SB.52
Amount of Each Disbursement this Period
55.00

Memo Item

Full Name (Last, First, Middle Initial)
C. EAGLE BANK

Date of Disbursement
MM / DD / YYYY
11 / 06 / 2017

Mailing Address 1425 K STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement BANK CHARGE

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : SB.53
Amount of Each Disbursement this Period
55.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 165.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. EAGLE BANK

Mailing Address 1425 K STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK CHARGE

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 |
| 1 | 2 | 3 | | 0 | 4 | 5 | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C []

Transaction ID : SB.54

Amount of Each Disbursement this Period

[] 55.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HILLTOP CONSULTANTS

Mailing Address 4201 CONNECTICUT AVENUE NW
STE 500

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
COMPUTER SERVICES/SUPPORT

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 | | | 0 | 6 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C []

Transaction ID : SB.56

Amount of Each Disbursement this Period

[] 462.66

Memo Item

Full Name (Last, First, Middle Initial)

C. HILLTOP CONSULTANTS

Mailing Address 4201 CONNECTICUT AVENUE NW
STE 500

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
COMPUTER SERVICES/SUPPORT

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 | 9 | | | 0 | 8 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C []

Transaction ID : SB.57

Amount of Each Disbursement this Period

[] 92.53

Memo Item

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

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

[] 610.19

[]

**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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. HILLTOP CONSULTANTS

Mailing Address 4201 CONNECTICUT AVENUE NW
STE 500

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
COMPUTER SERVICES/SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 29 / 2017

FEC Identification Number: C

Transaction ID : **SB.58**

Amount of Each Disbursement this Period: 370.13

Memo Item

Full Name (Last, First, Middle Initial)
B. HILLTOP CONSULTANTS

Mailing Address 4201 CONNECTICUT AVENUE NW
STE 500

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
COMPUTER SERVICES/SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 05 / 2017

FEC Identification Number: C

Transaction ID : **SB.59**

Amount of Each Disbursement this Period: 1228.28

Memo Item

Full Name (Last, First, Middle Initial)
C. HILLTOP CONSULTANTS

Mailing Address 4201 CONNECTICUT AVENUE NW
STE 500

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
COMPUTER SERVICES/SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 11 / 2017

FEC Identification Number: C

Transaction ID : **SB.60**

Amount of Each Disbursement this Period: 323.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1922.27

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. HOLLOWAY CONSULTING, INC.

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 06 / 2017

FEC Identification Number

C

Transaction ID : SB.61

Amount of Each Disbursement this Period

104.99

Memo Item

Full Name (Last, First, Middle Initial)

B. HOLLOWAY CONSULTING, INC.

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2017

FEC Identification Number

C

Transaction ID : SB.62

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HOLLOWAY CONSULTING, INC.

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

FEC Identification Number

C

Transaction ID : SB.63

Amount of Each Disbursement this Period

33000.00

Memo Item

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

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

35104.99

**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)
John Bolton Super PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. HOLLOWAY CONSULTING, INC. | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2017 |
| Mailing Address 2300 CLARENDON BLVD. STE 1306 | | FEC Identification Number C [] Transaction ID : SB.64 |
| City ARLINGTON | State VA | Zip Code 22201 |
| Purpose of Disbursement FUNDRAISING CONSULTING | | Amount of Each Disbursement this Period [] 2000.00 |
| Candidate Name | | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. HOLLOWAY CONSULTING, INC. | | Date of Disbursement MM / DD / YYYY 09 / 28 / 2017 |
| Mailing Address 2300 CLARENDON BLVD. STE 1306 | | FEC Identification Number C [] Transaction ID : SB.65 |
| City ARLINGTON | State VA | Zip Code 22201 |
| Purpose of Disbursement FUNDRAISING CONSULTING | | Amount of Each Disbursement this Period [] 2000.00 |
| Candidate Name | | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. HOLLOWAY CONSULTING, INC. | | Date of Disbursement MM / DD / YYYY 10 / 05 / 2017 |
| Mailing Address 2300 CLARENDON BLVD. STE 1306 | | FEC Identification Number C [] Transaction ID : SB.66 |
| City ARLINGTON | State VA | Zip Code 22201 |
| Purpose of Disbursement FUNDRAISING CONSULTING | | Amount of Each Disbursement this Period [] 1750.00 |
| Candidate Name | | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [] 5750.00 |
| TOTAL This Period (last page this line number only).....▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. HOLLOWAY CONSULTING, INC.

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 02 | | | 2017 | | | |

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : SB.67

Amount of Each Disbursement this Period

[REDACTED] 80001.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. HOLLOWAY CONSULTING, INC.

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2017 | | | |

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : SB.68

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. HOLLOWAY CONSULTING, INC.

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 10 | | | 2017 | | | |

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING CONSULTING EXPENSE

FEC Identification Number

C [REDACTED]

Transaction ID : SB.69

Amount of Each Disbursement this Period

[REDACTED] 314.97

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 82315.97

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. HOLLOWAY CONSULTING, INC.

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 22 / 2017

FEC Identification Number

C

Transaction ID : SB.70

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOLLOWAY CONSULTING, INC.

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 31 / 2017

FEC Identification Number

C

Transaction ID : SB.71

Amount of Each Disbursement this Period

30800.00

Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2700 COAST AVENUE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 05 / 2017

FEC Identification Number

C

Transaction ID : SB.72

Amount of Each Disbursement this Period

36.00

Memo Item

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

32836.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. INTUIT | | Date of Disbursement MM / DD / YYYY 08 / 07 / 2017 |
| Mailing Address 2700 COAST AVENUE | | FEC Identification Number C [] Transaction ID : SB.73 Amount of Each Disbursement this Period [] 36.00 |
| City MOUNTAIN VIEW | State CA | Zip Code 94043 |
| Purpose of Disbursement SOFTWARE SUBSCRIPTION | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. INTUIT | | Date of Disbursement MM / DD / YYYY 09 / 05 / 2017 |
| Mailing Address 2700 COAST AVENUE | | FEC Identification Number C [] Transaction ID : SB.74 Amount of Each Disbursement this Period [] 36.00 |
| City MOUNTAIN VIEW | State CA | Zip Code 94043 |
| Purpose of Disbursement SOFTWARE SUBSCRIPTION | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. INTUIT | | Date of Disbursement MM / DD / YYYY 10 / 05 / 2017 |
| Mailing Address 2700 COAST AVENUE | | FEC Identification Number C [] Transaction ID : SB.75 Amount of Each Disbursement this Period [] 36.00 |
| City MOUNTAIN VIEW | State CA | Zip Code 94043 |
| Purpose of Disbursement SOFTWARE SUBSCRIPTION | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | |
|--|------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [] 108.00 |
| TOTAL This Period (last page this line number only).....▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2700 COAST AVENUE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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 Y Y
11 / 06 / 2017

FEC Identification Number

C []

Transaction ID : SB.76

Amount of Each Disbursement this Period

[] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2700 COAST AVENUE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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 Y Y
12 / 05 / 2017

FEC Identification Number

C []

Transaction ID : SB.77

Amount of Each Disbursement this Period

[] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PRISMGROUP

Mailing Address 4910 ALBEMARLE ST. NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
COMMUNICATIONS STRATEGY CONSULTING

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 Y Y
07 / 06 / 2017

FEC Identification Number

C []

Transaction ID : SB.85

Amount of Each Disbursement this Period

[] 5626.04

Memo Item

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

[] 5726.04

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)
John Bolton Super PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. PRISMGROUP | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2017 |
| Mailing Address 4910 ALBEMARLE ST. NW | | FEC Identification Number C [] Transaction ID : SB.86 Amount of Each Disbursement this Period 5659.71 |
| City WASHINGTON | State DC | Zip Code 20016 |
| Purpose of Disbursement COMMUNICATIONS STRATEGY CONSULTING | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. PRISMGROUP | | Date of Disbursement MM / DD / YYYY 09 / 08 / 2017 |
| Mailing Address 4910 ALBEMARLE ST. NW | | FEC Identification Number C [] Transaction ID : SB.87 Amount of Each Disbursement this Period 5659.71 |
| City WASHINGTON | State DC | Zip Code 20016 |
| Purpose of Disbursement COMMUNICATIONS STRATEGY CONSULTING | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. PRISMGROUP | | Date of Disbursement MM / DD / YYYY 09 / 29 / 2017 |
| Mailing Address 4910 ALBEMARLE ST. NW | | FEC Identification Number C [] Transaction ID : SB.88 Amount of Each Disbursement this Period 5008.14 |
| City WASHINGTON | State DC | Zip Code 20016 |
| Purpose of Disbursement COMMUNICATIONS STRATEGY CONSULTING | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

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

16327.56

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)
John Bolton Super PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. PRISMGROUP | | Date of Disbursement MM / DD / YYYY 10 / 05 / 2017 |
| Mailing Address 4910 ALBEMARLE ST. NW | | FEC Identification Number C [] Transaction ID : SB.89 Amount of Each Disbursement this Period 5721.50 |
| City WASHINGTON | State DC | Zip Code 20016 |
| Purpose of Disbursement COMMUNICATIONS STRATEGY CONSULTING | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. PRISMGROUP | | Date of Disbursement MM / DD / YYYY 11 / 16 / 2017 |
| Mailing Address 4910 ALBEMARLE ST. NW | | FEC Identification Number C [] Transaction ID : SB.90 Amount of Each Disbursement this Period 5257.15 |
| City WASHINGTON | State DC | Zip Code 20016 |
| Purpose of Disbursement COMMUNICATIONS STRATEGY CONSULTING | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. PRISMGROUP | | Date of Disbursement MM / DD / YYYY 12 / 07 / 2017 |
| Mailing Address 4910 ALBEMARLE ST. NW | | FEC Identification Number C [] Transaction ID : SB.91 Amount of Each Disbursement this Period 5507.30 |
| City WASHINGTON | State DC | Zip Code 20016 |
| Purpose of Disbursement COMMUNICATIONS STRATEGY CONSULTING | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

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

16485.95

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 |

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. PRISMGROUP

Mailing Address 4910 ALBEMARLE ST. NW

City
WASHINGTON

State
DC

Zip Code
20016

Purpose of Disbursement
COMMUNICATIONS STRATEGY CONSULTING

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 31 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : SB.92

Amount of Each Disbursement this Period

[] 5240.50

Memo Item

Full Name (Last, First, Middle Initial)

B. SANDLER-INNOCENZI

Mailing Address 705 PRINCE STREET

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
MEDIA STRATEGY CONSULTING

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 06 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : SB.93

Amount of Each Disbursement this Period

[] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SANDLER-INNOCENZI

Mailing Address 705 PRINCE STREET

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
MEDIA STRATEGY CONSULTING

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 02 | | | 2017 | | | |

FEC Identification Number

C []

Transaction ID : SB.94

Amount of Each Disbursement this Period

[] 7500.00

Memo Item

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

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

[] 15240.50

[]

**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)
John Bolton Super PAC

A. SANDLER-INNOCENZI

Full Name (Last, First, Middle Initial)

Mailing Address 705 PRINCE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement MEDIA STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB.95

Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 5000.00

TOTAL This Period (last page this line number only).....▶ 413491.20