

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**Defend Our Conservative Senate PAC (DOC'S PAC)**

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

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00632323** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2022 through  /  /  2022

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

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="30110.55"/>	<input type="text" value="30110.55"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="110133.70"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="22250.00"/>	<input type="text" value="282475.98"/>
(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="132383.70"/>	<input type="text" value="312586.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33954.65"/>	<input type="text" value="214157.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="98429.05"/>	<input type="text" value="98429.05"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Defend Our Conservative Senate PAC (DOC'S 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).....	2250.00	11250.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2250.00	11250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	255500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	22250.00	266750.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	12192.58
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	2033.40
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	1500.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	22250.00	282475.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	22250.00	282475.98

**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 .....	8954.65	86657.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8954.65	86657.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	123500.00
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	4000.00
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)) ..	33954.65	214157.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33954.65	214157.48

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	22250.00	266750.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22250.00	266750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	8954.65	86657.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2033.40
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8954.65	84624.08

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

This amendment is in response to the letter from the Commission dated March 15, 2023, requesting additional information on the amended year-end report for 2022. The amended year end report did not include aggregates for any of the donors on schedule A. We determined that we had set the new year cycle for the system after the original year end report and when we ran the amended report did not turn the cycle period back to 2022 to allow the system to accurately calculate the aggregates. We have fixed this issue and the correct aggregates for each donor are included on Schedule A of this amended report

Form/Schedule:  
Transaction ID:

**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 16
	<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	

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

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

**A. BARLOON, WILLIAM, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6048 EDGEWOOD TERRACE  
 City ALEXANDRIA State VA Zip Code 22307-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 22 / 2022  
**Transaction ID : SA11A.54273**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. HAWKINS, JAMES, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2604 N. NELSON ST.  
 City ARLINGTON State VA Zip Code 22207-5032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALPINE GROUP Occupation (for Individual) LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 22 / 2022  
**Transaction ID : SA11A.54275**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. ZUMWALT, BRYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4109 18TH ST. N  
 City ARLINGTON State VA Zip Code 22207-3055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FTI CONSULTING Occupation (for Individual) SENIOR MANAGING DIRECTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 12 / 22 / 2022  
**Transaction ID : SA11A.54274**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**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 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. RED RIVER CO, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 15239  
 City WASHINGTON State DC Zip Code 20003-0239  
 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 ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2022  
**Transaction ID : SA11A.54373**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**  
 IN KIND - FUNDRAISING SERVICES; SEE ATTRIBUTION BELOW; SEE ATTRIBUTION

**B. COHEN, KARRIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1110 TRINITY DRIVE  
 City ALEXANDRIA State VA Zip Code 22314-4722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RED RIVER CO, LLC PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2022  
**Transaction ID : SA11A.54374**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**  
 FUNDRAISING SERVICES; PARTNERSHIP ATTRIBUTION

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2250.00



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

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

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

**A. AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTI**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 MASSACHUSETTS AVENUE, NW, SUITE  
 City WASHINGTON State DC Zip Code 20001-  
 FEC ID number of contributing federal political committee. **C** C00413955  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **12 / 22 / 2022**  
**Transaction ID : SA11C.54278**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**B. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 14TH STREET, NW SUITE 1100  
 City WASHINGTON State DC Zip Code 20005-5627  
 FEC ID number of contributing federal political committee. **C** C00000729  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt **12 / 30 / 2022**  
**Transaction ID : SA11C.54383**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1505 PRINCE STREET SUITE 300  
 City ALEXANDRIA State VA Zip Code 22314-2874  
 FEC ID number of contributing federal political committee. **C** C00024968  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **12 / 30 / 2022**  
**Transaction ID : SA11C.54372**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. DAVITA INC. POLITICAL ACTION COMMITTEE (DAPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 32275 32ND AVE, S.

City FEDERAL WAY	State WA	Zip Code 98001-9616
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FEC ID number of contributing federal political committee. **C** C00340943

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2022

**Transaction ID : SA11C.54382**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. ELEVANCE HEALTH, INC. POLITICAL ACTION COMMITTEE (ELEVANCE H**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
SUITE 710

City WASHINGTON	State DC	Zip Code 20004-2513
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FEC ID number of contributing federal political committee. **C** C00197228

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2022

**Transaction ID : SA11C.54276**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 317 MASSACHUSETTS AVENUE NORTHEAST  
1ST FLOOR

City WASHINGTON	State DC	Zip Code 20002-5769
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FEC ID number of contributing federal political committee. **C** C00343137

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2022

**Transaction ID : SA11C.54272**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

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

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

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

**A. PROFESSIONAL COMPOUNDING CENTERS OF AMERICA POLITICAL ACTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 9901 SOUTH WILCREST DR

City HOUSTON	State TX	Zip Code 77099-5132
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FEC ID number of contributing federal political committee. **C** C00558452

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2022

**Transaction ID : SA11C.54277**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. SPINE PAC OF THE NATIONAL ASSOCIATION OF SPINE SPECIALISTS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 7075 VETERANS BLVD.

City BURR RIDGE	State IL	Zip Code 60527-5614
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FEC ID number of contributing federal political committee. **C** C00349225

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2022

**Transaction ID : SA11C.54381**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. THE NORTHWESTERN MUTUAL LIFE INSURANCE CO. FEDERAL PAC (NORT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 720 E WISCONSIN AVE

City MILWAUKEE	State WI	Zip Code 53202-4703
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FEC ID number of contributing federal political committee. **C** C00197095

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2022

**Transaction ID : SA11C.54279**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	20000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		28		2022

Mailing Address 314 INDEPENDENCE AVE SE  
LOWER SUITE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CAMPAIGN CONSULTING

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1891**  
Amount of Each Disbursement this Period  
[ ] 3000.00

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		20		2022

Mailing Address 1593 SPRING HILL RD

City VIENNA State VA Zip Code 22182

Purpose of Disbursement  
DATABASE SERVICES

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1891**  
Amount of Each Disbursement this Period  
[ ] 250.00

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. DELTA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		27		2022

Mailing Address P.O. BOX 20980

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement  
TRAVEL

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1891**  
Amount of Each Disbursement this Period  
[ ] 224.60

Candidate Name

Category/  
Type

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

Memo Item

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

[ ] 3474.60

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ELECTION CFO**

Mailing Address P.O. BOX 26141

City  
ALEXANDRIA

State  
VA

Zip Code  
22313

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2022			

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.I1891:**  
Amount of Each Disbursement this Period  
[Redacted] 864.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. RED RIVER CO, LLC**

Mailing Address PO BOX 15239

City  
WASHINGTON

State  
DC

Zip Code  
20003-0239

Purpose of Disbursement  
IN-KIND CONTRIBUTION

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			13			2022			

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.54373**  
Amount of Each Disbursement this Period  
[Redacted] 250.00

IN KIND - FUNDRAISING SERVICES

Memo Item

Full Name (Last, First, Middle Initial)

**C. RUTH'S CHRIS STEAK HOUSE**

Mailing Address 1030 WEST CANTON AVENUE  
#100

City  
WINTER PARK

State  
FL

Zip Code  
32789

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			19			2022			

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.I1891**  
Amount of Each Disbursement this Period  
[Redacted] 3667.77

Memo Item

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

[Redacted] 4782.17
--------------------

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

[Redacted]
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. SCHNEIDER'S LIQUOR**

Mailing Address 300 MASSACHUSETTS AVE., NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
12 / 05 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.I1890I  
Amount of Each Disbursement this Period  
332.87

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE GREENBRIER**

Mailing Address 101 MAIN STREET WEST

City WHITE SULPHUR SPRI State WV Zip Code 24986

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
12 / 13 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.I1891I  
Amount of Each Disbursement this Period  
15.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE GREENBRIER**

Mailing Address 101 MAIN STREET WEST

City WHITE SULPHUR SPRI State WV Zip Code 24986

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  
12 / 12 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.I1891I  
Amount of Each Disbursement this Period  
200.00

Memo Item

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

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

548.67  
8805.44

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial)

A. JOSH HAWLEY FOR SENATE

Mailing Address PO BOX 31476

City ST. LOUIS State MO Zip Code 63131

Purpose of Disbursement CONTRIBUTION

Candidate Name HAWLEY, JOSHUA, DAVID SEN, ,

Office Sought: Senate (checked) Disbursement For: 2024 Primary (checked) General Other (specify) PRIMARY

Full Name (Last, First, Middle Initial)

B. JOSH HAWLEY FOR SENATE

Mailing Address PO BOX 31476

City ST. LOUIS State MO Zip Code 63131

Purpose of Disbursement CONTRIBUTION

Candidate Name HAWLEY, JOSHUA, DAVID SEN, ,

Office Sought: Senate (checked) Disbursement For: 2024 General (checked) Other (specify) GENERAL

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address 6103 MURRAY LANE

City BRENTWOOD State TN Zip Code 37027

Purpose of Disbursement CONTRIBUTION

Candidate Name BLACKBURN, MARSHA, MRS., ,

Office Sought: Senate (checked) Disbursement For: 2024 Primary (checked) General Other (specify) PRIMARY

Date of Disbursement: 12 / 31 / 2022

FEC Identification Number: C00652727 Transaction ID: SB23.I18903 Amount of Each Disbursement this Period: 5000.00

Memo Item

Date of Disbursement: 12 / 31 / 2022

FEC Identification Number: C00652727 Transaction ID: SB23.I18904 Amount of Each Disbursement this Period: 5000.00

Memo Item

Date of Disbursement: 12 / 14 / 2022

FEC Identification Number: C00376939 Transaction ID: SB23.I18900 Amount of Each Disbursement this Period: 5000.00

Memo Item

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

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

Summary boxes showing 15000.00 and an empty box.

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. TED CRUZ FOR SENATE**

Mailing Address PO BOX 25376

City  
HOUSTON

State  
TX

Zip Code  
77265

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CRUZ, RAFAEL, EDWARD TED, ,**

Office Sought:

House

Senate

President

Disbursement For: 2024

Primary  General

Other (specify) ▼

**PRIMARY**

State: TX District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2022			

FEC Identification Number

**C** C00492785

**Transaction ID : SB23.I18898**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. TED CRUZ FOR SENATE**

Mailing Address PO BOX 25376

City  
HOUSTON

State  
TX

Zip Code  
77265

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CRUZ, RAFAEL, EDWARD TED, ,**

Office Sought:

House

Senate

President

Disbursement For: 2024

Primary  General

Other (specify) ▼

**GENERAL**

State: TX District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2022			

FEC Identification Number

**C** C00492785

**Transaction ID : SB23.I18899**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

10000.00

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

25000.00