



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value=""/>	<input type="text" value="455782.41"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="569447.22"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="399392.59"/>	<input type="text" value="5085931.87"/>
(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="968839.81"/>	<input type="text" value="5541714.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="798654.68"/>	<input type="text" value="5371529.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="170185.13"/>	<input type="text" value="170185.13"/>
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

FEC Form 3X (Rev. 06/2004)

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).....	345907.00	4816949.00
(ii) Unitemized .....	52387.48	257150.02
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	398294.48	5074099.02
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	398294.48	5084099.02
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).....	1088.12	1088.12
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	9.99	744.73
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))..... ▶	399392.59	5085931.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	399392.59	5085931.87

**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 .....	353615.90	2320039.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	353615.90	2320039.87
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) .....	445038.78	3045839.28
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	0.00	5650.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	798654.68	5371529.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	798654.68	5371529.15

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	398294.48	5084099.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	398294.48	5084099.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	353615.90	2320039.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1088.12	1088.12
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	352527.78	2318951.75

**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 72
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert Almon Sr**

Mailing Address 2008 12th St

City Tuscaloosa State AL Zip Code 35401

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : SA11AI.32019**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Alan Altman MD**

Mailing Address 855 Brush Creek Rd

City Aspen State CO Zip Code 81611

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

Name of Employer Self Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2014

**Transaction ID : SA11AI.32021**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Taz Anderson**

Mailing Address 2931 Paces Ferry Road, S.E.

City Atlanta State GA Zip Code 30339

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

Name of Employer self-employed Occupation real estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11AI.27996**

Amount of Each Receipt this Period  
250.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 72  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Jane Bainum**

Mailing Address 5630 Wisconsin Ave Apt 501

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
n/a retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2014  
**Transaction ID : SA11AI.32056**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. James Baker**

Mailing Address 1172 Park Avenue, #4BD

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Neuberger Berman investments

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2014  
**Transaction ID : SA11AI.27803**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**c. Imelda Bambery**

Mailing Address 20941 Sailmaker Cir

City State Zip Code  
Huntington Beach CA 92648

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

Name of Employer Occupation  
n/a retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2014  
**Transaction ID : SA11AI.32060**

Amount of Each Receipt this Period  
301.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2301.00

**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 72
<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**

Full Name (Last, First, Middle Initial) <b>A. Mr N. Gerald Beard</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 24 / 2014 <b>Transaction ID : SA11AI.32073</b>
Mailing Address 5765 Indian Cir		Amount of Each Receipt this Period 200.00
City Houston	State TX	Zip Code 77057
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Barbara Beck</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 18 / 2014 <b>Transaction ID : SA11AI.32077</b>
Mailing Address 1935 Danbury W		Amount of Each Receipt this Period 75.00
City Okemos	State MI	Zip Code 48864
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>C. Richard Bernstein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 24 / 2014 <b>Transaction ID : SA11AI.32096</b>
Mailing Address 18 Rockledge Rd		Amount of Each Receipt this Period 500.00
City Rye	State NY	Zip Code 10580
FEC ID number of contributing federal political committee. C		
Name of Employer P & E Capital, Inc.	Occupation executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	775.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 72  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Norman Bobrow**

Mailing Address 181-06 Tudor Road

City Jamaica	State NY	Zip Code 11432
-----------------	-------------	-------------------

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

Name of Employer Norman Bobrow & Company	Occupation owner
---	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2014

**Transaction ID : SA11AI.27801**

Amount of Each Receipt this Period  
15000.00

Full Name (Last, First, Middle Initial)  
**B. Gary Bond**

Mailing Address 3126 S Boulevard # 288

City Edmond	State OK	Zip Code 73013
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2014

**Transaction ID : SA11AI.32126**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Mr Peter Bourbeau**

Mailing Address 430 Village Pl Apt 100

City Longwood	State FL	Zip Code 32779
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

**Transaction ID : SA11AI.27999**

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15375.00
<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 72
	<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**

Full Name (Last, First, Middle Initial)  
**A. Gilbert Boyd**

Mailing Address 901 Vanguard St

City State Zip Code  
Lakeway TX 78734

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

Name of Employer Occupation  
n/a retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2014  
**Transaction ID : SA11AI.27998**

Amount of Each Receipt this Period  
125.00

Full Name (Last, First, Middle Initial)  
**B. Mr Harold Brown**

Mailing Address 1336 Walnut St

City State Zip Code  
Kingman KS 67068

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

Name of Employer Occupation  
n/a retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2014  
**Transaction ID : SA11AI.32157**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. William Burns**

Mailing Address 5812 Williamsburg Landing Dr

City State Zip Code  
Williamsburg VA 23185

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 18 / 2014  
**Transaction ID : SA11AI.32170**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 72  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. John Buser**

Mailing Address 5305 Swiss Avenue

City State Zip Code  
Dallas TX 75214

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

Name of Employer Occupation  
Neuberger Berman investment management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 16 / 2014  
**Transaction ID : SA11AI.25719**

Amount of Each Receipt this Period  
20000.00

Full Name (Last, First, Middle Initial)  
**B. George Byard**

Mailing Address 109 Augusta Ct

City State Zip Code  
Dayton NV 89403

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

Name of Employer Occupation  
n/a retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 20 / 2014  
**Transaction ID : SA11AI.32177**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Patrick Byrne**

Mailing Address 700 Bitner Road

City State Zip Code  
Park City UT 84098

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

Name of Employer Occupation  
Overstock.com c.e.o.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 20 / 2014  
**Transaction ID : SA11AI.28070**

Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30250.00

**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 72
	<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. Ron Carner**  
Full Name (Last, First, Middle Initial)

Mailing Address 220 Riverside Blvd., #16J

City New York State NY Zip Code 10069

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

Name of Employer self-employed Occupation attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 28 / 2014  
**Transaction ID : SA11AI.27874**

Amount of Each Receipt this Period  
250.00

**B. Jeff Coghlan**  
Full Name (Last, First, Middle Initial)

Mailing Address 124 Crocker Hill Road

City Binghamton State NY Zip Code 13904

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

Name of Employer Wendbing Corp. Occupation executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 26 / 2014  
**Transaction ID : SA11AI.27822**

Amount of Each Receipt this Period  
10000.00

**C. Mr Edwin Cohen**  
Full Name (Last, First, Middle Initial)

Mailing Address 25 Sutton Pl S Apt 16G

City New York State NY Zip Code 10022

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2014  
**Transaction ID : SA11AI.32217**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10350.00
<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 13 OF 72
	<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. Mr William Cooney Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12502 Sweet Leaf Ter  
 City State Zip Code  
 Fairfax VA 22033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Systems Engineer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 455.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2014  
**Transaction ID : SA11AI.32228**  
 Amount of Each Receipt this Period  
 100.00

**B. Suzanne Crowell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1256 Oak Grove Ave  
 City State Zip Code  
 San Marino CA 91108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 n/a retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2014  
**Transaction ID : SA11AI.32260**  
 Amount of Each Receipt this Period  
 51.00

**C. William Dobbin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 Elliot Way, #300  
 City State Zip Code  
 Manchester NH 03103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 self-employed physician  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2014  
**Transaction ID : SA11AI.27762**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00  
**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 72
	<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**

Full Name (Last, First, Middle Initial) <b>A. Druscilla Doehrman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2014 <b>Transaction ID : SA11AI.27953</b>
Mailing Address P. O. Box 2165		Amount of Each Receipt this Period 250.00
City Naples	State FL	Zip Code 34106
FEC ID number of contributing federal political committee. C	Name of Employer n/a	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Billie Dorris</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2014 <b>Transaction ID : SA11AI.27974</b>
Mailing Address 3500 Autumn Drive		Amount of Each Receipt this Period 500.00
City Fort Worth	State TX	Zip Code 76109
FEC ID number of contributing federal political committee. C	Name of Employer n/a	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. William Enrich</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2014 <b>Transaction ID : SA11AI.32344</b>
Mailing Address 301 E 75th St Apt 5F		Amount of Each Receipt this Period 250.00
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. James C. France</b>		Date of Receipt
Mailing Address P. O. Box 2875		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Daytona Beach FL 32120		<b>Transaction ID : SA11AI.27840</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Name of Employer International Speedway Corp.	Occupation executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Louise Gaertner</b>		Date of Receipt
Mailing Address 700 Pine Valley Ct		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City State Zip Code Arnold MD 21012		<b>Transaction ID : SA11AI.32394</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Jeanette Goldbaum</b>		Date of Receipt
Mailing Address 20608 Chatsboro Dr		<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Woodland Hills CA 91364		<b>Transaction ID : SA11AI.32418</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 72
	<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. Christopher L. Grant**  
Full Name (Last, First, Middle Initial)

Mailing Address 1250 Connecticut Ave., N.W., #200

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

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

Name of Employer self-employed	Occupation attorney
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2014

**Transaction ID : SA11AI.27820**

Amount of Each Receipt this Period  
250.00

**B. Mr Frederick Greenman Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 1411 Rosewood Ave Apt 201

City Lakewood	State OH	Zip Code 44107
------------------	-------------	-------------------

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

Name of Employer self-employed	Occupation attorney
-----------------------------------	------------------------

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	/	18	/	2014

**Transaction ID : SA11AI.32435**

Amount of Each Receipt this Period  
200.00

**C. Emily Griffin**  
Full Name (Last, First, Middle Initial)

Mailing Address 2021 Goldsmith St

City Houston	State TX	Zip Code 77030
-----------------	-------------	-------------------

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

Name of Employer n/a	Occupation homemaker
-------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2014

**Transaction ID : SA11AI.32438**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Gil Gunderson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2014 <b>Transaction ID : SA11AI.27933</b>
Mailing Address PO Box 1408		Amount of Each Receipt this Period 150.00
City Wrangell	State AK	Zip Code 99929
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation commercial fisherman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B. Arthur Hilsinger Jr</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2014 <b>Transaction ID : SA11AI.32508</b>
Mailing Address 8 Jackson Pond Rd		Amount of Each Receipt this Period 500.00
City Dedham	State MA	Zip Code 02026
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Paul Jackson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2014 <b>Transaction ID : SA11AI.32551</b>
Mailing Address 917 Marina Dr		Amount of Each Receipt this Period 300.00
City Panama City Beach	State FL	Zip Code 32407
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 72  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Mike Jocelyn**

Mailing Address 8382 W. Nichols Avenue

City Littleton      State CO      Zip Code 80128

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

Name of Employer Alpine Meadows Management      Occupation manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2014  
**Transaction ID : SA11AI.27958**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Mary Johnston**

Mailing Address 21241 SE 40th St

City Sammamish      State WA      Zip Code 98075

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

Name of Employer Retired      Occupation Retired

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  
 10 / 21 / 2014  
**Transaction ID : SA11AI.32575**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. James Lago**

Mailing Address 3325 Lizard Head Ln

City Sedona      State AZ      Zip Code 86336

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

Name of Employer Retired      Occupation Retired

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  
 10 / 23 / 2014  
**Transaction ID : SA11AI.32633**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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 72
	<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**

Full Name (Last, First, Middle Initial) <b>A. Leora Levy</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 28 / 2014 <b>Transaction ID : SA11AI.27871</b>
Mailing Address 59 Pecksland Road		Amount of Each Receipt this Period 3000.00
City Greenwich	State CT	Zip Code 06831
FEC ID number of contributing federal political committee. C	Name of Employer n/a	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. Richard Malley</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 18 / 2014 <b>Transaction ID : SA11AI.32702</b>
Mailing Address 10452 El Dorado Way		Amount of Each Receipt this Period 150.00
City Los Alamitos	State CA	Zip Code 90720
FEC ID number of contributing federal political committee. C	Name of Employer self-employed	Occupation accountant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. Ruth Nelson</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 18 / 2014 <b>Transaction ID : SA11AI.32811</b>
Mailing Address 1116 Mace Ave		Amount of Each Receipt this Period 200.00
City Bronx	State NY	Zip Code 10469
FEC ID number of contributing federal political committee. C	Name of Employer n/a	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3350.00
<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 20 OF 72
	<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**

Full Name (Last, First, Middle Initial)  
**A. David Oven**

Mailing Address PO Box 1466

City Enid State OK Zip Code 73702

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

Name of Employer self-employed Occupation investments

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 / 24 / 2014**

Transaction ID : **SA11AI.32839**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**B. Mr James Paisley**

Mailing Address 10200 E Harvard Ave Apt 257

City Denver State CO Zip Code 80231

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 24 / 2014**

Transaction ID : **SA11AI.32841**

Amount of Each Receipt this Period  
**35.00**

Full Name (Last, First, Middle Initial)  
**C. Mrs Kay Poitras**

Mailing Address 949 Hamilton Cir

City Haines City State FL Zip Code 33844

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

Name of Employer n/a Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 19 / 2014**

Transaction ID : **SA11AI.32873**

Amount of Each Receipt this Period  
**200.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>435.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 72
	<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. Mr Charles Riggs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15 Thomas Pointe Dr  
City Fort Thomas State KY Zip Code 41075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **251.00**

Date of Receipt **10 / 27 / 2014**  
**Transaction ID : SA11AI.32922**  
Amount of Each Receipt this Period **100.00**

**B. Mr Charles Riggs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15 Thomas Pointe Dr  
City Fort Thomas State KY Zip Code 41075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt **11 / 21 / 2014**  
**Transaction ID : SA11AI.32923**  
Amount of Each Receipt this Period **50.00**

**C. Phyllis Robinson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15308 Diamond Cove Ter Apt I  
City Rockville State MD Zip Code 20850  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation retired  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **325.00**

Date of Receipt **11 / 19 / 2014**  
**Transaction ID : SA11AI.32930**  
Amount of Each Receipt this Period **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **175.00**  
**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 22 OF 72
	<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**

Full Name (Last, First, Middle Initial) <b>A. Ms Elizabeth Ruffin</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 10 / 2014 <b>Transaction ID : SA11AI.32948</b>
Mailing Address 1707 Jarvis St		Amount of Each Receipt this Period 250.00
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Vincent Russo</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014 <b>Transaction ID : SA11AI.32954</b>
Mailing Address 21 Amber Ct		Amount of Each Receipt this Period 70.00
City Homosassa	State FL	Zip Code 34446
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. Richard Sambol</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2014 <b>Transaction ID : SA11AI.27805</b>
Mailing Address 3181 Monet Drive West		Amount of Each Receipt this Period 5000.00
City Palm Beach Gardens	State FL	Zip Code 33410
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5320.00
<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 23 OF 72
	<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. Doris Schlehofer**  
Full Name (Last, First, Middle Initial)

Mailing Address 19 Centre Pike

City Eastford State CT Zip Code 06242

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

Name of Employer n/a Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 18 / 2014**

**Transaction ID : SA11AI.32983**

Amount of Each Receipt this Period  
**200.00**

**B. Robert Schneebeck**  
Full Name (Last, First, Middle Initial)

Mailing Address 741 N Manasota Key Road

City Englewood State FL Zip Code 34223

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

Name of Employer Strategic Program Managers Occupation president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 28 / 2014**

**Transaction ID : SA11AI.32989**

Amount of Each Receipt this Period  
**200.00**

**C. William Sconiers**  
Full Name (Last, First, Middle Initial)

Mailing Address 419 E Main St Apt 321

City Hendersonville State TN Zip Code 37075

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 16 / 2014**

**Transaction ID : SA11AI.32998**

Amount of Each Receipt this Period  
**200.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 72
	<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. Ms Patricia Shaughnessy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11728 S Tongass Hwy  
 City Ketchikan State AK Zip Code 99901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Experience AK Tones Occupation Inn Keeper  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2014  
**Transaction ID : SA11AI.33012**  
 Amount of Each Receipt this Period  
 100.00

**B. Mr John Shively**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3280 County Line Rd  
 City Keysville State VA Zip Code 23947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Pipelines Equipment Operator  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **251.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2014  
**Transaction ID : SA11AI.33023**  
 Amount of Each Receipt this Period  
 100.00

**c. Herbert Siegel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 190 E 72nd St  
 City New York State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired Executive  
 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 / 24 / 2014  
**Transaction ID : SA11AI.33028**  
 Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 72
	<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. Willard Sollinger**  
Full Name (Last, First, Middle Initial)

Mailing Address 945 Walker Woods Ln

City Marysville State OH Zip Code 43040

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

Name of Employer n/a Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 18 / 2014  
**Transaction ID : SA11AI.33045**

Amount of Each Receipt this Period  
500.00

**B. Leslie Topper**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 E. 79th Street, #28C

City New York State NY Zip Code 10075

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

Name of Employer n/a Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 22 / 2014  
**Transaction ID : SA11AI.27807**

Amount of Each Receipt this Period  
7200.00

**C. Lewis Topper**  
Full Name (Last, First, Middle Initial)

Mailing Address 3605 Camp Mineola Road

City Mattituck State NY Zip Code 11952

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

Name of Employer Fast Food Systems Occupation executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 17 / 2014  
**Transaction ID : SA11AI.25723**

Amount of Each Receipt this Period  
15000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	22700.00
<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 26 OF 72
	<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**

Full Name (Last, First, Middle Initial) <b>A. Lewis Topper</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2014 <b>Transaction ID : SA11AI.27767</b>
Mailing Address 3605 Camp Mineola Road		Amount of Each Receipt this Period 30000.00
City Mattituck	State NY	Zip Code 11952
FEC ID number of contributing federal political committee. C	Name of Employer Fast Food Systems	Occupation executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60000.00	

Full Name (Last, First, Middle Initial) <b>B. Lewis Topper</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 29 / 2014 <b>Transaction ID : SA11AI.27882</b>
Mailing Address 3605 Camp Mineola Road		Amount of Each Receipt this Period 30000.00
City Mattituck	State NY	Zip Code 11952
FEC ID number of contributing federal political committee. C	Name of Employer Fast Food Systems	Occupation executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 90000.00	

Full Name (Last, First, Middle Initial) <b>C. Ray Troutman</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 18 / 2014 <b>Transaction ID : SA11AI.33140</b>
Mailing Address 6337 Klamath Rd		Amount of Each Receipt this Period 250.00
City Fort Worth	State TX	Zip Code 76116
FEC ID number of contributing federal political committee. C	Name of Employer n/a	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60250.00
<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 27 OF 72
	<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. Richard E. Uihlein**  
Full Name (Last, First, Middle Initial)

Mailing Address 1396 N. Waukegan Road

City Lake Forest State IL Zip Code 60045

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

Name of Employer Uline Occupation c.e.o.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2014  
**Transaction ID : SA11AI.27815**

Amount of Each Receipt this Period  
 100000.00

**B. Marcia Ulm**  
Full Name (Last, First, Middle Initial)

Mailing Address 1240 Ramser Drive

City Watkinsville State GA Zip Code 30677

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

Name of Employer MLU Services Occupation 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  
 10 / 29 / 2014  
**Transaction ID : SA11AI.27883**

Amount of Each Receipt this Period  
 10000.00

**c. United Refining Company**  
Full Name (Last, First, Middle Initial)

Mailing Address 823 11th Avenue

City New York State NY Zip Code 10019

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

Name of Employer Occupation

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  
 10 / 21 / 2014  
**Transaction ID : SA11AI.27802**

Amount of Each Receipt this Period  
 15000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Catherine Warren</b>		Date of Receipt
Mailing Address 12 Fair Way		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Poughkeepsie	NY	12603
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.33186</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Samuel Zell</b>		Date of Receipt
Mailing Address 2 N. Riverside Plaza		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60606
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.25721</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50000.00"/>
Name of Employer	Occupation	
Equity Group Investments	chairman	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="50000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text" value="C"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="51000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="345907.00"/>

**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 29 OF 72
<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)  
**John Bolton Super PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Sarah Tinsley**

Mailing Address 4039 Mansion Drive, N.W.

City Washington State DC Zip Code 20007

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

Name of Employer John Bolton Occupation administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1088.12

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 17 / 2014

**Transaction ID : SA15.28069**

Amount of Each Receipt this Period  
 1088.12

refund-office equipment

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1088.12
<b>TOTAL</b> This Period (last page this line number only).....▶	1088.12

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

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

FOR LINE NUMBER: PAGE 30 OF 72  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
744.73

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2014  
**Transaction ID : SA17.28058**

Amount of Each Receipt this Period  
9.99

interest

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9.99
<b>TOTAL</b> This Period (last page this line number only).....▶	9.99

**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"/> 24	<input type="checkbox"/> 25	<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. Baker & Hostetler, LLP**

Mailing Address P. O. Box 70189

City Cleveland State OH Zip Code 44190

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2014

**Transaction ID : SB21B.27813**

Amount of Each Disbursement this Period

1300.00

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  
email 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 / 04 / 2014

**Transaction ID : SB21B.27927**

Amount of Each Disbursement this Period

1878.10

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  
advertising/non-candidate

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2014

**Transaction ID : SB21B.27928**

Amount of Each Disbursement this Period

319.95

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

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

3498.05

**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"/> 24	<input type="checkbox"/> 25	<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  
website 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 / 14 / 2014

**Transaction ID : SB21B.28025**

Amount of Each Disbursement this Period

12675.00

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  
telephone calls

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2014

**Transaction ID : SB21B.28061**

Amount of Each Disbursement this Period

3086.67

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  
website 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 / 20 / 2014

**Transaction ID : SB21B.28062**

Amount of Each Disbursement this Period

12675.00

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

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

28436.67

**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"/> 24	<input type="checkbox"/> 25	<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. Canon Financial Services, Inc.**

Mailing Address 14904 Collections Center Drive

City Chicago State IL Zip Code 60693

Purpose of Disbursement  
equipment rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2014

**Transaction ID : SB21B.27814**

Amount of Each Disbursement this Period

156.51

Full Name (Last, First, Middle Initial)

**B. Carey International**

Mailing Address 5300 Spspectrum Drive, #D

City Frederick State MD Zip Code 21703

Purpose of Disbursement  
transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 04 / 2014

**Transaction ID : SB21B.27926**

Amount of Each Disbursement this Period

1949.92

Full Name (Last, First, Middle Initial)

**C. Carey International**

Mailing Address 5300 Spspectrum Drive, #D

City Frederick State MD Zip Code 21703

Purpose of Disbursement  
transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 20 / 2014

**Transaction ID : SB21B.28063**

Amount of Each Disbursement this Period

1958.53

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

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

4064.96

**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"/> 24	<input type="checkbox"/> 25	<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. CD, Inc.**

Mailing Address P. O. Box 1877

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
media placement/non-candidate

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  
10 / 20 / 2014

**Transaction ID : SB21B.27781**

Amount of Each Disbursement this Period

23750.00

Full Name (Last, First, Middle Initial)

**B. CD, Inc.**

Mailing Address P. O. Box 1877

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
online advertising/non-candidate

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  
10 / 29 / 2014

**Transaction ID : SB21B.27886**

Amount of Each Disbursement this Period

95000.00

Full Name (Last, First, Middle Initial)

**C. CESC 1730 M Street, LLC**

Mailing Address P. O. Box 642773

City Pittsburgh State PA Zip Code 15264

Purpose of Disbursement  
office rent

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  
10 / 24 / 2014

**Transaction ID : SB21B.27817**

Amount of Each Disbursement this Period

96628.80

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

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

215378.80

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2014

**Transaction ID : SB21B.25724**

Amount of Each Disbursement this Period

5972.57

Full Name (Last, First, Middle Initial)

**B. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2014

**Transaction ID : SB21B.27931**

Amount of Each Disbursement this Period

2510.62

Full Name (Last, First, Middle Initial)

**C. First Virginia Community Bank**

Mailing Address 11325 Random Hills Road  
Suite 240

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 24 / 2014

**Transaction ID : SB21B.28089**

Amount of Each Disbursement this Period

119.32

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

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

8602.51

**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"/> 24	<input type="checkbox"/> 25	<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. Global Payments**

Mailing Address 10705 Red Run Blvd.

City State Zip Code  
Rockville MD 20855

Purpose of Disbursement  
credit card fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 03 / 2014

**Transaction ID : SB21B.33254**

Amount of Each Disbursement this Period

361.43

Full Name (Last, First, Middle Initial)

**B. Global Payments**

Mailing Address 10705 Red Run Blvd.

City State Zip Code  
Rockville MD 20855

Purpose of Disbursement  
credit card fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 24 / 2014

**Transaction ID : SB21B.28090**

Amount of Each Disbursement this Period

296.64

Full Name (Last, First, Middle Initial)

**C. Hannibal Software, Inc.**

Mailing Address 515 Seward Square, S.E., #3

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
data conversion

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 20 / 2014

**Transaction ID : SB21B.27769**

Amount of Each Disbursement this Period

750.00

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

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

1408.07

**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"/> 24	<input type="checkbox"/> 25	<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. Hannibal Software, Inc.**

Mailing Address 515 Seward Square, S.E., #3

City Washington State DC Zip Code 20003

Purpose of Disbursement  
data conversion

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2014

Transaction ID : **SB21B.27812**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**B. Harbinger, LLC**

Mailing Address 1919 M Street, N.W., #200

City Washington State DC Zip Code 20036

Purpose of Disbursement  
media production/non-candidate

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2014

Transaction ID : **SB21B.28072**

Amount of Each Disbursement this Period

8500.00

Full Name (Last, First, Middle Initial)

**C. Holloway Consulting, Inc.**

Mailing Address 2300 Clarendon Blvd., #1306

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
travel/software

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2014

Transaction ID : **SB21B.28077**

Amount of Each Disbursement this Period

806.45

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

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

10056.45

**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"/> 24	<input type="checkbox"/> 25	<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., #1306

City State Zip Code  
Arlington VA 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 M / D D D / Y Y Y Y Y Y  
11 / 21 / 2014

**Transaction ID : SB21B.28078**

Amount of Each Disbursement this Period

8000.00

Full Name (Last, First, Middle Initial)

**B. HSP Direct**

Mailing Address 20130 Lakeview Center Plaza, #300

City State Zip Code  
Ashburn VA 20147

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2014

**Transaction ID : SB21B.28056**

Amount of Each Disbursement this Period

3652.00

Full Name (Last, First, Middle Initial)

**C. HSP Direct**

Mailing Address 20130 Lakeview Center Plaza, #300

City State Zip Code  
Ashburn VA 20147

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 06 / 2014

**Transaction ID : SB21B.28082**

Amount of Each Disbursement this Period

348.00

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

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

12000.00

**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"/> 24	<input type="checkbox"/> 25	<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. HSP Direct**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 20 / 2014

**Transaction ID : SB21B.28086**

Amount of Each Disbursement this Period

1334.00

Full Name (Last, First, Middle Initial)

**B. Nova List Company, LLC**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 13 / 2014

**Transaction ID : SB21B.28084**

Amount of Each Disbursement this Period

2292.81

Full Name (Last, First, Middle Initial)

**C. Postage for Direct Mail Fundraising**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2014

**Transaction ID : SB21B.28057**

Amount of Each Disbursement this Period

583.73

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

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

4210.54

**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"/> 24	<input type="checkbox"/> 25	<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. Postage for Direct Mail Fundraising**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
postage

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
11			20			2014			

Transaction ID : **SB21B.28087**

Amount of Each Disbursement this Period

13311.86
----------

Full Name (Last, First, Middle Initial)

**B. Prism Strategy Group, Inc.**

Mailing Address 2511 Q Street, N.W., #105

City Washington State DC Zip Code 20007

Purpose of Disbursement  
communications 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
10			20			2014			

Transaction ID : **SB21B.27770**

Amount of Each Disbursement this Period

4000.00
---------

Full Name (Last, First, Middle Initial)

**C. Prism Strategy Group, Inc.**

Mailing Address 2511 Q Street, N.W., #105

City Washington State DC Zip Code 20007

Purpose of Disbursement  
communications 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
11			20			2014			

Transaction ID : **SB21B.28060**

Amount of Each Disbursement this Period

26796.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

44107.86
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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"/> 24	<input type="checkbox"/> 25	<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. Robert Watkins & Company, P.A.**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting 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  
10 / 30 / 2014

**Transaction ID : SB21B.27895**

Amount of Each Disbursement this Period

6310.42

Full Name (Last, First, Middle Initial)

**B. Sunrise Data Services**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
list rental/maintenance

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  
10 / 23 / 2014

**Transaction ID : SB21B.28054**

Amount of Each Disbursement this Period

915.00

Full Name (Last, First, Middle Initial)

**C. Sunrise Data Services**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
list rental/maintenance

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  
10 / 30 / 2014

**Transaction ID : SB21B.28055**

Amount of Each Disbursement this Period

130.00

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

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

7355.42

**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"/> 24	<input type="checkbox"/> 25	<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. Sunrise Data Services**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
direct mail 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 / 13 / 2014

**Transaction ID : SB21B.28085**

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

**B. Sunrise Data Services**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
direct mail 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 / 20 / 2014

**Transaction ID : SB21B.28088**

Amount of Each Disbursement this Period

165.00

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2014

**Transaction ID : SB21B.25728**

Amount of Each Disbursement this Period

20.00

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

460.00

**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"/> 24	<input type="checkbox"/> 25	<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 Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2014

**Transaction ID : SB21B.27842**

Amount of Each Disbursement this Period

20.00

**B. The Bank of Tampa**

Full Name (Last, First, Middle Initial)

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2014

**Transaction ID : SB21B.27885**

Amount of Each Disbursement this Period

20.00

**C. The Bank of Tampa**

Full Name (Last, First, Middle Initial)

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2014

**Transaction ID : SB21B.28096**

Amount of Each Disbursement this Period

15.00

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

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

55.00

**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"/> 24	<input type="checkbox"/> 25	<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. Sarah Tinsley**

Mailing Address 4039 Mansion Drive, N.W.

City Washington State DC Zip Code 20007

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2014

**Transaction ID : SB21B.28026**

Amount of Each Disbursement this Period

5000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. United Business Technologies**

Mailing Address 9218 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
copies

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2014

**Transaction ID : SB21B.28024**

Amount of Each Disbursement this Period

267.07

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Visa**

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement  
see memo entries

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2014

**Transaction ID : SB21B.28021**

Amount of Each Disbursement this Period

1088.12

Category/  
Type

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

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

6355.19

**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"/> 24	<input type="checkbox"/> 25	<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. Magnolia Home Theater**

Mailing Address 4500 Wisconsin Avenue, N.W.

City Washington State DC Zip Code 20016

Purpose of Disbursement  
office equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2014

Transaction ID : SB21B.28021.0

Amount of Each Disbursement this Period

996.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Visa**

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement  
see memo entries

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2014

Transaction ID : SB21B.28022

Amount of Each Disbursement this Period

310.43

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2014

Transaction ID : SB21B.28022.0

Amount of Each Disbursement this Period

9.26

[MEMO ITEM]

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

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

310.43

**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"/> 24	<input type="checkbox"/> 25	<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) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.28022.1

Amount of Each Disbursement this Period

22.00

[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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

Transaction ID : SB21B.28022.2

Amount of Each Disbursement this Period

261.41

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Visa**

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement see memo entries

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2014

Transaction ID : SB21B.28023

Amount of Each Disbursement this Period

3678.76

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

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

3678.76

# 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"/> 24	<input type="checkbox"/> 25	<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. FedEx

Mailing Address 13155 Noel Road, #1600

City State Zip Code  
Dallas TX 75240

Purpose of Disbursement  
delivery

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
10			18			2014			

Transaction ID : SB21B.28023.0

Amount of Each Disbursement this Period

21.72
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B. Microsoft

Mailing Address 1 Microsoft Way

City State Zip Code  
Redmond WA 98052

Purpose of Disbursement  
software

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
10			14			2014			

Transaction ID : SB21B.28023.1

Amount of Each Disbursement this Period

33.84
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### C. Microsoft

Mailing Address 1 Microsoft Way

City State Zip Code  
Redmond WA 98052

Purpose of Disbursement  
software

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
10			14			2014			

Transaction ID : SB21B.28023.2

Amount of Each Disbursement this Period

60.91
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[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. HRG Worldwide**

Mailing Address 16 E. 34th Street, 3rd Floor

City State Zip Code  
New York NY 10016

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  
10 / 08 / 2014

**Transaction ID : SB21B.28023.3**

Amount of Each Disbursement this Period

33.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 111 W. Rio Salado Parkway

City State Zip Code  
Tempe AZ 85281

Purpose of Disbursement  
transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2014

**Transaction ID : SB21B.28023.4**

Amount of Each Disbursement this Period

558.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FedEx**

Mailing Address 13155 Noel Road, #1600

City State Zip Code  
Dallas TX 75240

Purpose of Disbursement  
delivery

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2014

**Transaction ID : SB21B.28023.5**

Amount of Each Disbursement this Period

21.72

[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"/> 24	<input type="checkbox"/> 25	<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. Cort Business Services**

Mailing Address 5432 W. Chester Road

City West Chester State OH Zip Code 45069

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

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2014

Transaction ID : SB21B.28023.6

Amount of Each Disbursement this Period

784.12

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FedEx**

Mailing Address 13155 Noel Road, #1600

City Dallas State TX Zip Code 75240

Purpose of Disbursement delivery

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB21B.28023.7

Amount of Each Disbursement this Period

21.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FedEx**

Mailing Address 13155 Noel Road, #1600

City Dallas State TX Zip Code 75240

Purpose of Disbursement delivery

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2014

Transaction ID : SB21B.28023.8

Amount of Each Disbursement this Period

51.18

[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"/> 24	<input type="checkbox"/> 25	<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**

Mailing Address 1 Lincoln Road

City Miami Beach State FL Zip Code 33139

Purpose of Disbursement  
lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014

**Transaction ID : SB21B.28023.9**

Amount of Each Disbursement this Period

956.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Cort Business Services**

Mailing Address 5432 W. Chester Road

City West Chester State OH Zip Code 45069

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

M M M / D D D / Y Y Y Y Y Y  
09 / 19 / 2014

**Transaction ID : SB21B.28023.10**

Amount of Each Disbursement this Period

72.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2014

**Transaction ID : SB21B.28023.11**

Amount of Each Disbursement this Period

656.00

[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"/> 24	<input type="checkbox"/> 25	<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 4333 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : SB21B.28023.12

Amount of Each Disbursement this Period

406.40
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement direct mail services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB21B.28053

Amount of Each Disbursement this Period

1945.51
---------

Full Name (Last, First, Middle Initial)

**C. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement direct mail services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB21B.28083

Amount of Each Disbursement this Period

1691.68
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3637.19
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353615.90
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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2014
Mailing Address 117 N. Saint Asaph Street	Amount <span style="border: 1px solid black; padding: 2px;">842.54</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SE.27827</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2014
Purpose of Expenditure emails Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Thom R. Tillis Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1302792.65</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2014
Mailing Address 117 N. Saint Asaph Street	Amount <span style="border: 1px solid black; padding: 2px;">248.79</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SE.27851</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2014
Purpose of Expenditure emails Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Thomas Cotton Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AR
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">802566.99</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">1091.33</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Nancy H. Watkins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 04 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2014
Mailing Address 117 N. Saint Asaph Street	Amount 242.88
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SE.27852</b>
Purpose of Expenditure emails Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2014
Name of Federal Candidate Thomas Cotton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 802809.87	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2014
Mailing Address 117 N. Saint Asaph Street	Amount 95.43
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SE.27863</b>
Purpose of Expenditure emails Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2014
Name of Federal Candidate Scott Brown <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 699227.24	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	338.31
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Nancy H. Watkins [Electronically Filed] Date MM / DD / YYYY 12 / 04 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 27 / 2014
Mailing Address 117 N. Saint Asaph Street	Amount <span style="margin-left: 20px;">90.24</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SE.27864</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 27 / 2014
Purpose of Expenditure emails Category/Type	Name of Federal Candidate Scott Brown <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">699317.48</span>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 30 / 2014
Mailing Address 117 N. Saint Asaph Street	Amount <span style="margin-left: 20px;">247.83</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SE.27911</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 31 / 2014
Purpose of Expenditure online advertising Category/Type	Name of Federal Candidate Thomas Cotton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">803057.70</span>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">338.07</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 30 / 2014</b>
Mailing Address 117 N. Saint Asaph Street	Amount <b>94.75</b>
City Alexandria	State VA
Zip Code 22314	<b>Transaction ID : SE.27915</b>
Purpose of Expenditure online advertising	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 31 / 2014</b>
Name of Federal Candidate Scott Brown	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

699412.23

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 30 / 2014</b>
Mailing Address 117 N. Saint Asaph Street	Amount <b>865.98</b>
City Alexandria	State VA
Zip Code 22314	<b>Transaction ID : SE.27919</b>
Purpose of Expenditure online advertising	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 31 / 2014</b>
Name of Federal Candidate Thom R. Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

1423664.13

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>960.73</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **12 / 04 / 2014**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 03 / 2014</b>
Mailing Address 117 N. Saint Asaph Street	Amount <span style="margin-left: 20px;">93.67</span>
City Alexandria	State VA
Zip Code 22314	<b>Transaction ID : SE.27917</b>
Purpose of Expenditure online advertising	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 03 / 2014</b>
Name of Federal Candidate Scott Brown	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<span style="margin-left: 20px;">699584.28</span>	

Full Name of Payee <b>Campaign Solutions</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 03 / 2014</b>
Mailing Address 117 N. Saint Asaph Street	Amount <span style="margin-left: 20px;">1046.76</span>
City Alexandria	State VA
Zip Code 22314	<b>Transaction ID : SE.27921</b>
Purpose of Expenditure online advertising	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 03 / 2014</b>
Name of Federal Candidate Thom R. Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<span style="margin-left: 20px;">1428250.89</span>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">1140.43</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins*  
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y  
**12 / 04 / 2014**





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CD, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Mailing Address P. O. Box 1877	Amount <span style="border: 1px solid black; padding: 2px;">50005.50</span>
City State Zip Code Alexandria VA 22313	<b>Transaction ID : SE.27843</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Purpose of Expenditure online advertising	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Thom R. Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1352798.15</span>	

Full Name of Payee <b>CD, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2014
Mailing Address P. O. Box 1877	Amount <span style="border: 1px solid black; padding: 2px;">70000.00</span>
City State Zip Code Alexandria VA 22313	<b>Transaction ID : SE.27888</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2014
Purpose of Expenditure online advertising	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Kay R. Hagan	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1422798.15</span>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">120005.50</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 04 / 2014

Signature \_\_\_\_\_





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Harbinger, LLC</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 28 / 2014</b>
Mailing Address 1919 M Street, N.W., #200	Amount <b>6250.00</b>
City Washington      State DC      Zip Code 20036	<b>Transaction ID : SE.27849</b>
Purpose of Expenditure media production      Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 21 / 2014</b>
Name of Federal Candidate Thom R. Tillis <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought <b>1435534.11</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Harbinger, LLC</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 28 / 2014</b>
Mailing Address 1919 M Street, N.W., #200	Amount <b>6250.00</b>
City Washington      State DC      Zip Code 20036	<b>Transaction ID : SE.27855</b>
Purpose of Expenditure media production      Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 21 / 2014</b>
Name of Federal Candidate Thomas Cotton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>AR</b>
Calendar Year-To-Date Per Election for Office Sought <b>819757.55</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>12500.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Nancy H. Watkins      [Electronically Filed]      Date **12 / 04 / 2014**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>		FEC IDENTIFICATION NUMBER <b>C C00542464</b>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Harbinger, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 28 / 2014</b>
Mailing Address 1919 M Street, N.W., #200		Amount <b>4764.92</b>
City Washington	State DC	Zip Code 20036
Purpose of Expenditure media-post production work	Category/Type	Transaction ID : <b>SE.28074</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 21 / 2014</b>
Name of Federal Candidate Thom R. Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought	<b>1448467.03</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 20 / 2014</b>
Mailing Address 3126 W. Cary Street, #410		Amount <b>6250.00</b>
City Richmond	State VA	Zip Code 23221
Purpose of Expenditure media production	Category/Type	Transaction ID : <b>SE.27773</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 17 / 2014</b>
Name of Federal Candidate Thomas Cotton	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AR</b>
Calendar Year-To-Date Per Election for Office Sought	<b>795008.91</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>11014.92</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins*

[Electronically Filed]

Date

MM / DD / YYYY  
**12 / 04 / 2014**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 20 / 2014
Mailing Address 3126 W. Cary Street, #410	Amount <span style="border: 1px solid black; padding: 2px;">6250.00</span>
City Richmond State VA Zip Code 23221	<b>Transaction ID : SE.27774</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 17 / 2014
Purpose of Expenditure media production	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Scott Brown	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">692031.93</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 20 / 2014
Mailing Address 3126 W. Cary Street, #410	Amount <span style="border: 1px solid black; padding: 2px;">6250.00</span>
City Richmond State VA Zip Code 23221	<b>Transaction ID : SE.27775</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 17 / 2014
Purpose of Expenditure media production	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Thom R. Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1073009.66</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">12500.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins*  
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 28 / 2014</b>
Mailing Address <b>3126 W. Cary Street, #410</b>	Amount <span style="float:right">6250.00</span>
City <b>Richmond</b> State <b>VA</b> Zip Code <b>23221</b>	<b>Transaction ID : SE.27853</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 21 / 2014</b>
Purpose of Expenditure media production	Category/Type <span style="float:right">[ ]</span>
Name of Federal Candidate <b>Thomas Cotton</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>AR</b>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">813507.55</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 28 / 2014</b>
Mailing Address <b>3126 W. Cary Street, #410</b>	Amount <span style="float:right">6250.00</span>
City <b>Richmond</b> State <b>VA</b> Zip Code <b>23221</b>	<b>Transaction ID : SE.27866</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 21 / 2014</b>
Purpose of Expenditure media production	Category/Type <span style="float:right">[ ]</span>
Name of Federal Candidate <b>Scott Brown</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">712177.24</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">12500.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="float:right">[ ]</span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="float:right">[ ]</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**12 / 04 / 2014**

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014	
Mailing Address 3126 W. Cary Street, #410		Amount <span style="border: 1px solid black; padding: 2px;">959.00</span>	
City Richmond	State VA	Zip Code 23221	<b>Transaction ID : SE.28065</b>
Purpose of Expenditure media expense	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 21 / 2014	
Name of Federal Candidate Thomas Cotton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">820716.55</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2014	
Mailing Address 3126 W. Cary Street, #410		Amount <span style="border: 1px solid black; padding: 2px;">959.00</span>	
City Richmond	State VA	Zip Code 23221	<b>Transaction ID : SE.28066</b>
Purpose of Expenditure media expense	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 21 / 2014	
Name of Federal Candidate Thomas Cotton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">821675.55</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	1918.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins [Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
12 / 04 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 03 / 2014</b>
Mailing Address <b>3126 W. Cary Street, #410</b>	Amount <span style="margin-left: 20px;">959.00</span>
City <b>Richmond</b> State <b>VA</b> Zip Code <b>23221</b>	<b>Transaction ID : SE.28067</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 21 / 2014</b>
Purpose of Expenditure media expense	Category/Type <span style="margin-left: 20px;">[ ]</span>
Name of Federal Candidate <b>Thom R. Tillis</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">1442743.11</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Poolhouse Digital Agency, LLC</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 04 / 2014</b>
Mailing Address <b>3126 W. Cary Street, #410</b>	Amount <span style="margin-left: 20px;">959.00</span>
City <b>Richmond</b> State <b>VA</b> Zip Code <b>23221</b>	<b>Transaction ID : SE.28068</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 21 / 2014</b>
Purpose of Expenditure media expense	Category/Type <span style="margin-left: 20px;">[ ]</span>
Name of Federal Candidate <b>Thom R. Tillis</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">1443702.11</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">1918.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;">[ ]</span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;">445038.78</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**12 / 04 / 2014**

Signature