

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Believe In Life Liberty Yourself (BILLY PAC)

ADDRESS (number and street)

PO Box 3119

Check if different  
than previously  
reported. (ACC)

Springfield

MO

65808-3119

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00559146

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Taylor, Jered, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Taylor, Jered, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Believe In Life Liberty Yourself (BILLY PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 01 / 2019 To: M M / D D / Y Y Y Y Y 12 / 31 / 2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2019		<span style="border: 1px solid black; padding: 2px;">64812.06</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">65737.01</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">52519.13</span>	<span style="border: 1px solid black; padding: 2px;">75574.45</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">118256.14</span>	<span style="border: 1px solid black; padding: 2px;">140386.51</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">5669.85</span>	<span style="border: 1px solid black; padding: 2px;">27800.22</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">112586.29</span>	<span style="border: 1px solid black; padding: 2px;">112586.29</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



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. 05/2016)

Page 3

Write or Type Committee Name

Believe In Life Liberty Yourself (BILLY PAC)

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	9		

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).....	0.00	5000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	5000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	52500.00	63000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	52500.00	68000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	19.13	5074.45
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)) .....	52519.13	75574.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	52519.13	75574.45

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	1169.85	11300.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1169.85	11300.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	15500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1000.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5669.85	27800.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5669.85	27800.22

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	52500.00	68000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	52500.00	68000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	1169.85	11300.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	1169.85	11300.22

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

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

FOR LINE NUMBER: PAGE 6 OF 14

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Believe In Life Liberty Yourself (BILLY PAC)**

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

## **A. Charter Communications, INC Political Action Committee**

Mailing Address 400 Atlantic St  
 Fl 10

City  
 Stamford

State  
 CT

Zip Code  
 06901-3512

FEC ID number of contributing  
 federal political committee.

**C**

C00426775

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
 11 / 05 / 2019

**Transaction ID : A112A1BC1FFED4971ACF**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 Donation

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

## **B. T-Mobile Political Action Committee**

Mailing Address 601 Pennsylvania Ave NW  
 Ste 800N

City  
 Washington

State  
 DC

Zip Code  
 20004-2665

FEC ID number of contributing  
 federal political committee.

**C**

C00361758

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
 11 / 05 / 2019

**Transaction ID : A0FFE49F481EB4359926**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 Donation

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

## **C. Independent Insurance Agents & Brokers Of America, INC Political Action Committee**

Mailing Address 20 F St NW  
 Ste 610

City  
 Washington

State  
 DC

Zip Code  
 20001-6707

FEC ID number of contributing  
 federal political committee.

**C**

C00022343

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
 12 / 03 / 2019

**Transaction ID : AA55CBE9E49D04931A93**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 Donation

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

15000.00

**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 7 OF 14  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Believe In Life Liberty Yourself (BILLY PAC)**

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

## **A. Whirlpool Corporation Political Action Committee**

Mailing Address 701 Pennsylvania Ave NW  
Ste 750

City  
Washington

State  
DC

Zip Code  
20004-2661

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 03 / 2019

**Transaction ID : ADD67125F5D3C4787B63**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Donation

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

## **B. Edison Electric Institute PowerPAC**

Mailing Address 701 Pennsylvania Ave NW

City  
Washington

State  
DC

Zip Code  
20004-2608

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 03 / 2019

**Transaction ID : AA8AA70F850B1470BAC9**

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
Donation

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

## **C. National Turkey Federation Political Action Committee**

Mailing Address 1225 New York Ave NW  
Ste 400

City  
Washington

State  
DC

Zip Code  
20005-6404

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 03 / 2019

**Transaction ID : A4B7B628C15C740FAB8C**

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
Donation

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

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

9500.00

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

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

FOR LINE NUMBER: PAGE 8 OF 14

(check only one)

<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)

**Believe In Life Liberty Yourself (BILLY PAC)**

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

## **A. Koch Political Action Committee**

Mailing Address 600 14th St NW  
Ste 800

City  
Washington

State  
DC

Zip Code  
20005-2099

FEC ID number of contributing  
federal political committee.

C

C00236489

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2019

Transaction ID : A65C2E381B56544CF932

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 Donation

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

## **B. National Emergency Medicine Political Action Committee**

Mailing Address PO Box 619911

City  
Dallas

State  
TX

Zip Code  
75261-9911

FEC ID number of contributing  
federal political committee.

C

C00140061

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2019

Transaction ID : A61A5D0FAFCC4451B9F6

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 Donation

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

## **C. Council Of Insurance Agents & Brokers PAC**

Mailing Address 701 Pennsylvania Ave NW  
Ste 760

City  
Washington

State  
DC

Zip Code  
20004-2608

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2019

Transaction ID : AC05AE0A826894BF7914

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 Donation

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

12500.00

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 9 OF 14

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Believe In Life Liberty Yourself (BILLY PAC)**

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

## **A. National Cable & Telecommunications Association Political Action Committee**

Mailing Address 25 Massachusetts Ave NW  
Ste 100

City  
Washington

State  
DC

Zip Code  
20001-1434

FEC ID number of contributing  
federal political committee.

**C** C00010082

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**12** / **19** / **2019**

**Transaction ID : A67EE18D7CE724C5FB07**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Donation

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

## **B. Comcast Corporation & Nbcuniversal Political Action Committee**

Mailing Address 1701 John F Kennedy Blvd

City  
Philadelphia

State  
PA

Zip Code  
19103-2833

FEC ID number of contributing  
federal political committee.

**C** C00248716

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**12** / **23** / **2019**

**Transaction ID : AFC68E1E501FC4F5CAD3**

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
Donation

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

## **C. National Association Of Broadcasters Pac**

Mailing Address 1771 N St NW

City  
Washington

State  
DC

Zip Code  
20036-2800

FEC ID number of contributing  
federal political committee.

**C** C00009985

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**12** / **23** / **2019**

**Transaction ID : AE8A402ED2CED4293935**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
Donation

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

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

10500.00

# **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 10 OF 14

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Believe In Life Liberty Yourself (BILLY PAC)**

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

## **A. Flir Systems, Inc. Employee Political Action Committee**

Mailing Address 1201 S Joyce St

City  
Arlington

State  
VA

Zip Code  
22202-2066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 27 / 2019

**Transaction ID : A5141B0C4046645D78D4**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Donation

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

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

5000.00

52500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 14

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

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NAME OF COMMITTEE (In Full)

**Believe In Life Liberty Yourself (BILLY PAC)**

Full Name (Last, First, Middle Initial)

**A. Aristotle International**Mailing Address 3625 Ruffin Road  
Suite 100City  
San DiegoState  
CAZip Code  
92123-1841Purpose of Disbursement  
Campaign Software

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				03				2019					

FEC Identification Number

C [REDACTED]

Transaction ID : B9E885CDEF

Amount of Each Disbursement this Period

[REDACTED] 320.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NPC DialPay**

Mailing Address 7851 185th Street

City  
Tinley ParkState  
ILZip Code  
60477-6248Purpose of Disbursement  
Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				08				2019					

FEC Identification Number

C [REDACTED]

Transaction ID : BB9FA1582A

Amount of Each Disbursement this Period

[REDACTED] 69.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Aristotle International**Mailing Address 3625 Ruffin Road  
Suite 100City  
San DiegoState  
CAZip Code  
92123-1841Purpose of Disbursement  
Campaign Software

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				04				2019					

FEC Identification Number

C [REDACTED]

Transaction ID : B0DCF7B92f

Amount of Each Disbursement this Period

[REDACTED] 320.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

[REDACTED] 709.95

[REDACTED]

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 14

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

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NAME OF COMMITTEE (In Full)

**Believe In Life Liberty Yourself (BILLY PAC)**

Full Name (Last, First, Middle Initial)

**A. Aristotle International**Mailing Address 3625 Ruffin Road  
Suite 100City  
San DiegoState  
CAZip Code  
92123-1841Purpose of Disbursement  
Campaign Software

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : BCBED8EBB

Amount of Each Disbursement this Period

[REDACTED] 320.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NPC DialPay**

Mailing Address 7851 185th Street

City  
Tinley ParkState  
ILZip Code  
60477-6248Purpose of Disbursement  
Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : B94DE397908

Amount of Each Disbursement this Period

[REDACTED] 69.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NPC DialPay**

Mailing Address 7851 185th Street

City  
Tinley ParkState  
ILZip Code  
60477-6248Purpose of Disbursement  
Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : BEB1D24CC

Amount of Each Disbursement this Period

[REDACTED] 69.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

459.90

1169.85

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 14

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

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NAME OF COMMITTEE (In Full)

**Believe In Life Liberty Yourself (BILLY PAC)**

Full Name (Last, First, Middle Initial)

**A. Steve Chabot For Congress**

Mailing Address 3030 Harrison Ave

City  
CincinnatiState  
OHZip Code  
45211-5758Purpose of Disbursement  
Donation

011

Candidate Name

**Steve Chabot For Congress**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2019

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00301838

**Transaction ID : BF77DCAFD1**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Pete Sessions For Congress**

Mailing Address PO Box 823047

City  
DallasState  
TXZip Code  
75382-3047Purpose of Disbursement  
Donation

011

Candidate Name

**Sessions, Pete, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2019

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX

District: 32

Date of Disbursement

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

FEC Identification Number

C C00303305

**Transaction ID : BD87818D457**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3500.00

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

3500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 14

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

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NAME OF COMMITTEE (In Full)

**Believe In Life Liberty Yourself (BILLY PAC)**

Full Name (Last, First, Middle Initial)

**A. Ann Wagner For Congress**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		20		2019

Mailing Address PO Box 50

City  
BallwinState  
MOZip Code  
63022-0050Purpose of Disbursement  
Donation

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2019

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : B595FC16E3I

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

☐
Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

☐
Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1000.00

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

1000.00