

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00632323
3. IS THIS REPORT NEW OR AMENDED (A) [X] (N)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 29 / 2022 through 12 / 31 / 2022

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

Type or Print Name of Treasurer

Signature of Treasurer Marston, Chris, , , [Electronically Filed] Date 01 / 31 / 2023

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Defend Our Conservative Senate PAC (DOC'S PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		30110.55
(b) Cash on Hand at Beginning of Reporting Period.....	110133.70	
(c) Total Receipts (from Line 19)	22250.00	282475.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	132383.70	312586.53
7. Total Disbursements (from Line 31).....	28954.65	209157.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	103429.05	103429.05
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Defend Our Conservative Senate PAC (DOC'S PAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2250.00	11250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2250.00	11250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	255500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	22250.00	266750.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	12192.58
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	2033.40
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	1500.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	22250.00	282475.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	22250.00	282475.98

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	8954.65	86657.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8954.65	86657.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	118500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	4000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28954.65	209157.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28954.65	209157.48

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)	22250.00	266750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22250.00	266750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8954.65	86657.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2033.40
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8954.65	84624.08

**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 15
	<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

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

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

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

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

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

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

A. RED RIVER CO, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 15239
 City WASHINGTON State DC Zip Code 20003-0239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

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

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

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

B. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 14TH STREET, NW SUITE 1100
 City WASHINGTON State DC Zip Code 20005-5627
 FEC ID number of contributing federal political committee. **C** C00000729
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

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

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

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

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

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

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

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

A. DAVITA INC. POLITICAL ACTION COMMITTEE (DAPAC)

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

Mailing Address 32275 32ND AVE, S.

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID : SA11C.54382

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

Mailing Address 1001 PENNSYLVANIA AVENUE, NW
SUITE 710

City WASHINGTON	State DC	Zip Code 20004-2513
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00197228

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID : SA11C.54276

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

Mailing Address 317 MASSACHUSETTS AVENUE NORTHEAST
1ST FLOOR

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : SA11C.54272

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

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

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

A. PROFESSIONAL COMPOUNDING CENTERS OF AMERICA POLITICAL ACTION

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID : SA11C.54277

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. SPINE PAC OF THE NATIONAL ASSOCIATION OF SPINE SPECIALISTS

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID : SA11C.54381

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID : SA11C.54279

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. ROBERTSON, BRENT, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: 12 / 28 / 2022

Mailing Address: 314 INDEPENDENCE AVE SE
LOWER SUITE

City: WASHINGTON State: DC Zip Code: 20003

Purpose of Disbursement: CAMPAIGN CONSULTING

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C _____

Transaction ID : SB21B.I1891;

Amount of Each Disbursement this Period: 3000.00

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Date of Disbursement: 12 / 20 / 2022

Mailing Address: 1593 SPRING HILL RD

City: VIENNA State: VA Zip Code: 22182

Purpose of Disbursement: DATABASE SERVICES

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C _____

Transaction ID : SB21B.I1891;

Amount of Each Disbursement this Period: 250.00

Memo Item

C. DELTA

Full Name (Last, First, Middle Initial)

Date of Disbursement: 12 / 27 / 2022

Mailing Address: P.O. BOX 20980

City: ATLANTA State: GA Zip Code: 30320

Purpose of Disbursement: TRAVEL

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C _____

Transaction ID : SB21B.I1891

Amount of Each Disbursement this Period: 224.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3474.60

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. ELECTION CFO

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
12 / 15 / 2022

FEC Identification Number

C
Transaction ID : SB21B.I1891:
Amount of Each Disbursement this Period
864.40

Memo Item

Full Name (Last, First, Middle Initial)

B. RED RIVER CO, LLC

Mailing Address PO BOX 15239

City WASHINGTON State DC Zip Code 20003-0239

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/Type

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

FEC Identification Number

C
Transaction ID : SB21B.54373
Amount of Each Disbursement this Period
250.00
IN KIND - FUNDRAISING SERVICES

Memo Item

Full Name (Last, First, Middle Initial)

C. RUTH'S CHRIS STEAK HOUSE

Mailing Address 1030 WEST CANTON AVENUE #100

City WINTER PARK State FL Zip Code 32789

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
12 / 19 / 2022

FEC Identification Number

C
Transaction ID : SB21B.I1891
Amount of Each Disbursement this Period
3667.77

Memo Item

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

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

4782.17

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. SCHNEIDER'S LIQUOR

Mailing Address 300 MASSACHUSETTS AVE., NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2022

FEC Identification Number

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

Memo Item

Full Name (Last, First, Middle Initial)

B. THE GREENBRIER

Mailing Address 101 MAIN STREET WEST

City WHITE SULPHUR SPRI State WV Zip Code 24986

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2022

FEC Identification Number

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

Memo Item

Full Name (Last, First, Middle Initial)

C. THE GREENBRIER

Mailing Address 101 MAIN STREET WEST

City WHITE SULPHUR SPRI State WV Zip Code 24986

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2022

FEC Identification Number

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

Memo Item

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

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

548.67
8805.44

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. JOSH HAWLEY FOR SENATE

Mailing Address PO BOX 31476

City ST. LOUIS State MO Zip Code 63131

Purpose of Disbursement CONTRIBUTION

Candidate Name HAWLEY, JOSHUA, DAVID SEN, ,

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) **GENERAL**

State: MO District:

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2022

FEC Identification Number

C C00652727

Transaction ID : SB23.I18904

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address 6103 MURRAY LANE

City BRENTWOOD State TN Zip Code 37027

Purpose of Disbursement CONTRIBUTION

Candidate Name BLACKBURN, MARSHA , MRS., ,

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) **PRIMARY**

State: TN District: 07

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2022

FEC Identification Number

C C00376939

Transaction ID : SB23.I18900

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TED CRUZ FOR SENATE

Mailing Address PO BOX 25376

City HOUSTON State TX Zip Code 77265

Purpose of Disbursement CONTRIBUTION

Candidate Name CRUZ, RAFAEL, EDWARD TED, ,

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) **PRIMARY**

State: TX District:

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2022

FEC Identification Number

C C00492785

Transaction ID : SB23.I18898

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

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

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NAME OF COMMITTEE (In Full)

Defend Our Conservative Senate PAC (DOC'S PAC)

Full Name (Last, First, Middle Initial)

A. TED CRUZ FOR SENATE

Mailing Address PO BOX 25376

City
HOUSTON

State
TX

Zip Code
77265

Purpose of Disbursement
CONTRIBUTION

Candidate Name

CRUZ, RAFAEL, EDWARD TED, ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼
GENERAL

State: TX District:

Date of Disbursement

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

FEC Identification Number

C C00492785

Transaction ID : SB23.I18899

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

C

Amount of Each Disbursement this Period

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Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

C

Amount of Each Disbursement this Period

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Memo Item

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

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

5000.00

20000.00
