

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**

Never Surrender PAC

ADDRESS (number and street) PO Box 331046

Check if different than previously reported. (ACC) Nashville TN 37203

2. **FEC IDENTIFICATION NUMBER ▼** CITY ▲ STATE ▲ ZIP CODE ▲

C C00687525 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on M M / D D / 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 / D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2024 through 03 / 31 / 2024

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

Type or Print Name of Treasurer Hobbs, Cabell, , ,

Signature of Treasurer Hobbs, Cabell, , , Date 04 / 06 / 2024

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Never Surrender PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		63943.97
(b) Cash on Hand at Beginning of Reporting Period.....	63943.97	
(c) Total Receipts (from Line 19)	10526.08	10526.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	74470.05	74470.05
7. Total Disbursements (from Line 31).....	17056.65	17056.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	57413.40	57413.40
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Never Surrender PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

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	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	7500.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7500.00	7500.00
12. Transfers From Affiliated/Other Party Committees.....	3026.08	3026.08
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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)).....▶	10526.08	10526.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10526.08	10526.08

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	4306.65	4306.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4306.65	4306.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
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).....	10750.00	10750.00
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)) ..	17056.65	17056.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17056.65	17056.65

DETAILED SUMMARY PAGE
of Disbursements

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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)	7500.00	7500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7500.00	7500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4306.65	4306.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4306.65	4306.65

**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 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Never Surrender PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GENERAL ATOMICS POLITICAL ACTION COMMITTEE
 Mailing Address P.O. BOX 85608
 City SAN DIEGO State CA Zip Code 92186-5608
 FEC ID number of contributing federal political committee. **C** C00215285
 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
 02 / 02 / 2024
Transaction ID : SA11C.18445
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION C
 Mailing Address 4301 WILSON BOULEVARD
 City ARLINGTON State VA Zip Code 22203-4419
 FEC ID number of contributing federal political committee. **C** C00002972
 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
 02 / 02 / 2024
Transaction ID : SA11C.18446
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	7500.00

**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 7 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Never Surrender PAC

A. GREEN VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2706

City BRENTWOOD	State TN	Zip Code 37024-2706
FEC ID number of contributing federal political committee. C C00687574		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3026.08

Date of Receipt
MM / DD / YYYY
03 / 31 / 2024
Transaction ID : SA12.18579

Amount of Each Receipt this Period
3026.08

Memo Item
TRANSFER OF NET PROCEEDS

B. CARDELUCCI, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5455 W. WOODCHUCK

City WILSON	State WY	Zip Code 83014-
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2024
Transaction ID : SA.18433.3.05

Amount of Each Receipt this Period
900.00

Memo Item
TRANSFER
TRANSFER FROM GREEN VICTORY FUND

C. STEINMANN, JOSH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2137 N. CLIFTON AVENUE

City CHICAGO	State IL	Zip Code 60614-4115
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) INGENOVIS HEALTH		Occupation (for Individual) SVP CLIENT SERVICES
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2024
Transaction ID : SA.18533.3.05

Amount of Each Receipt this Period
2700.00

Memo Item
TRANSFER
TRANSFER FROM GREEN VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	3026.08
TOTAL This Period (last page this line number only).....	3026.08

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)
Never Surrender PAC

Full Name (Last, First, Middle Initial) A. HOLLOWAY CONSULTING, INC.		Date of Disbursement MM / DD / YYYY 01 / 02 / 2024
Mailing Address 1530 WILSON BLVD. STE 440		FEC Identification Number C Transaction ID : SB21B.I6213 Amount of Each Disbursement this Period 850.00
City ARLINGTON	State VA	
Zip Code 22209		Memo Item <input type="checkbox"/>
Purpose of Disbursement FINANCE CONSULTING		
Candidate Name		Category/Type <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. INTUIT		Date of Disbursement MM / DD / YYYY 01 / 04 / 2024
Mailing Address 2700 COAST AVE		FEC Identification Number C Transaction ID : SB21B.I6215 Amount of Each Disbursement this Period 65.55
City MOUNTAIN VIEW	State CA	
Zip Code 94043		Memo Item <input type="checkbox"/>
Purpose of Disbursement SUBSCRIPTION		
Candidate Name		Category/Type <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. RIGHTSIDE COMPLIANCE LLC		Date of Disbursement MM / DD / YYYY 01 / 08 / 2024
Mailing Address P.O. BOX 341027		FEC Identification Number C Transaction ID : SB21B.I6219 Amount of Each Disbursement this Period 385.00
City AUSTIN	State TX	
Zip Code 78734		Memo Item <input type="checkbox"/>
Purpose of Disbursement COMPLIANCE CONSULTING		
Candidate Name		Category/Type <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1300.55
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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Never Surrender PAC

Form A: CMDI. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and Date of Disbursement.

Form B: INTUIT. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and Date of Disbursement.

Form C: HOLLOWAY CONSULTING, INC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and Date of Disbursement.

SUBTOTAL of Disbursements This Page (optional) and 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)
Never Surrender PAC

A. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2024

FEC Identification Number: C

Transaction ID : SB21B.I6220

Amount of Each Disbursement this Period: 660.00

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 21 / 2024

FEC Identification Number: C

Transaction ID : SB21B.I6210

Amount of Each Disbursement this Period: 250.00

Memo Item

C. INTUIT

Full Name (Last, First, Middle Initial)

Mailing Address 2700 COAST AVE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2024

FEC Identification Number: C

Transaction ID : SB21B.I6217

Amount of Each Disbursement this Period: 65.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 975.55

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)
Never Surrender PAC

A. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2024

FEC Identification Number: C

Transaction ID : SB21B.I6221

Amount of Each Disbursement this Period: 715.00

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2024

FEC Identification Number: C

Transaction ID : SB21B.I6211

Amount of Each Disbursement this Period: 250.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	965.00
TOTAL This Period (last page this line number only).....▶	4306.65

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)
Never Surrender PAC

A. HAMILTON FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
HAMILTON, CAMERON, , ,

Office Sought: House Senate President
State: VA District: 07

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 29 / 2024

FEC Identification Number
C 00848028
Transaction ID : SB23.I6212

Amount of Each Disbursement this Period
2000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

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

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 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)
Never Surrender PAC

Full Name (Last, First, Middle Initial) A. JODY BARRETT FOR STATE REP		Date of Disbursement MM / DD / YYYY 01 / 09 / 2024
Mailing Address 702 E. COLLEGE STREET, SUITE 200		FEC Identification Number C [] Transaction ID : SB29.I6218
City DICKSON	State TN	Zip Code 37055
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Amount of Each Disbursement this Period [] 750.00
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: []	District: []	

Full Name (Last, First, Middle Initial) B. 917 SOCIETY		Date of Disbursement MM / DD / YYYY 02 / 13 / 2024
Mailing Address P.O. BOX 50704		FEC Identification Number C [] Transaction ID : SB29.I6208
City NASHVILLE	State TN	Zip Code 37205
Purpose of Disbursement SPONSORSHIP		Amount of Each Disbursement this Period [] 10000.00
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: []	District: []	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C []
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period []
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: []	District: []	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 10750.00
TOTAL This Period (last page this line number only).....▶	[] 10750.00