

# 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  
  
OLD BREED PAC

ADDRESS (number and street) PO BOX 183  
  
 Check if different than previously reported. (ACC) HUDSON WI 54016

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00819425

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:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> 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:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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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 DATWYLER, THOMAS, , ,

Signature of Treasurer DATWYLER, THOMAS, , , Date 04 / 14 / 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									
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SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OLD BREED 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		39331.70
(b) Cash on Hand at Beginning of Reporting Period.....	39331.70	
(c) Total Receipts (from Line 19) .....	19232.01	19232.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	58563.71	58563.71
7. Total Disbursements (from Line 31).....	28689.95	28689.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	29873.76	29873.76
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

OLD BREED 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).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	19232.01	19232.01
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)) .....	19232.01	19232.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	19232.01	19232.01

**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 .....	2189.95	2189.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2189.95	2189.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22000.00	22000.00
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).....	4500.00	4500.00
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)) ..	28689.95	28689.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28689.95	28689.95

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2189.95	2189.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2189.95	2189.95

# 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 16
<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

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)  
**OLD BREED PAC**

**A. MCCORMICK VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 183**

City <b>HUDSON</b>	State <b>WI</b>	Zip Code <b>54016</b>
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FEC ID number of contributing federal political committee. **C C00828202**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**19232.01**

Date of Receipt  
**03 / 31 / 2024**

**Transaction ID : A06D83F4EC19F4325B7D**

Amount of Each Receipt this Period  
**19232.01**

Memo Item

**B. BRADFORD, BRYAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **21 CHEROKEE RD NW**

City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30305</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INVESTOR** Occupation (for Individual) **SELF**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**02 / 14 / 2024**

**Transaction ID : A643AB9B74E744166858**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

**C. NICKELSEN, JOEL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2723 BONAR HALL PATH**

City <b>DULUTH</b>	State <b>GA</b>	Zip Code <b>30097</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **BUSINESS MANAGEMENT CONSULTANT** Occupation (for Individual) **BRIGHTORG SERVICES**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**1400.00**

Date of Receipt  
**02 / 11 / 2024**

**Transaction ID : A6086AF8CCECF4BB1812**

Amount of Each Receipt this Period  
**1400.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>19232.01</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 7 OF 16
<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)  
**OLD BREED PAC**

**A. LACKEY, ANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 874 JAMES SPRINGS RD  
 City DANIELSVILLE State GA Zip Code 30633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **01 / 18 / 2024**  
**Transaction ID : AA0B581C1FE96404B984**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. PHILLIPS, DON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3328 RISING FAWN TRL  
 City SUWANEE State GA Zip Code 30024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **03 / 06 / 2024**  
**Transaction ID : A5D7E52FA8D244290941**  
 Amount of Each Receipt this Period 900.00  
 Memo Item

**C. OGLESBY, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 969 MIDDLEFORK TRAIL  
 City SUWANEE State GA Zip Code 30024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 02 / 2024**  
**Transaction ID : A0A3BF0D5773E4107B50**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 8 OF 16
<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)  
**OLD BREED PAC**

**A. OGLESBY, DIANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 969 MIDDLEFORK TRAIL  
 City SUWANEE State GA Zip Code 30024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 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  
 03 / 02 / 2024  
**Transaction ID : A40FEA5A41ED1443E91F**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. TERWILLIGER, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6020 WINTERTHUR DRIVE NORTHWEST  
 City ATLANTA State GA Zip Code 30328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) 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  
 03 / 06 / 2024  
**Transaction ID : AC62E4433EBAF471EB70**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

**C. PARK, SUNNY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3835 PRESIDENTIAL PARKWAY  
 City ATLANTA State GA Zip Code 30340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GBM  
 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  
 03 / 20 / 2024  
**Transaction ID : AC5C9F79CB55E4C3BA64**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 16  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**OLD BREED PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SEE, GREG, , ,**

Mailing Address **45 MOUNT PARAN ROAD NORTHWEST**

City ATLANTA State GA Zip Code 30327

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

Name of Employer (for Individual) OWNER Occupation (for Individual) TOTAL ANCILLARY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1700.00**

Date of Receipt  
**03 / 26 / 2024**

**Transaction ID : A890AC3FEAA714EDAB46**

Amount of Each Receipt this Period  
**1700.00**

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>19232.01</b>

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)
OLD BREED PAC

Form A: ARISTOTLE INTERNATIONAL, INC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: ARISTOTLE INTERNATIONAL, INC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: AXCAPITAL, LLC Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 1250.00
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"/> 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)  
**OLD BREED PAC**

**A. AXCAPITAL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 800 W 47TH ST  
STE 200

City KANSAS CITY State MO Zip Code 64112-1244

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 17 / 2024

FEC Identification Number: C

Transaction ID : B94045305F6

Amount of Each Disbursement this Period: 350.00

Memo Item

**B. AXCAPITAL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 800 W 47TH ST  
STE 200

City KANSAS CITY State MO Zip Code 64112-1244

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 11 / 2024

FEC Identification Number: C

Transaction ID : B4A8D3D4EC

Amount of Each Disbursement this Period: 350.00

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)..... ▶ 700.00

**TOTAL** This Period (last page this line number only)..... ▶ 1950.00

**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)  
**OLD BREED PAC**

Full Name (Last, First, Middle Initial) <b>A. ANDREWS FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2024
Mailing Address PO BOX 46		FEC Identification Number C C00721142 <b>Transaction ID : BA61913780I</b>
City CATHARPIN	State VA	Zip Code 20143-0046
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type 011
Candidate Name ANDREWS, ALISCIA, , ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" 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: VA	District: 10	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. COMMITTEE TO ELECT MIKE EZELL</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2024
Mailing Address P.O. BOX 1842		FEC Identification Number C C00776393 <b>Transaction ID : B9D0CD5C0D</b>
City GULFPORT	State MS	Zip Code 39502-1842
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type 011
Candidate Name EZELL, WALTER, MICHAEL, ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" 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: DC	District: 04	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. DONALD J. TRUMP FOR PRESIDENT 2024, INC.</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2024
Mailing Address P.O. BOX 13570		FEC Identification Number C C00828541 <b>Transaction ID : B3061D94B7</b>
City ARLINGTON	State VA	Zip Code 22219-3570
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type 011
Candidate Name TRUMP, DONALD, J., ,		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District:	
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9000.00
<b>TOTAL</b> 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, where 23 is checked.

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NAME OF COMMITTEE (In Full)
OLD BREED PAC

Form A: FRIENDS FOR JOSH CLARK, INC. with fields for Mailing Address, City, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, and Amount of Each Disbursement.

Form B: JOHNSON LEADERSHIP FUND with fields for Mailing Address, City, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, and Amount of Each Disbursement.

Form C: LAUREN BOEBERT FOR CONGRESS with fields for Mailing Address, City, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 5000.00
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 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)  
**OLD BREED PAC**

Full Name (Last, First, Middle Initial)

### A. PHILIP SINGLETON FOR CONGRESS

Mailing Address 55 HAZELRIDGE LN

City SHARPSBURG State GA Zip Code 30277-1930

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
SINGLETON, PHILIP, JERALD, ,

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼  
State: GA District: 03

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2024

FEC Identification Number

C C00647891

Transaction ID : BE998F7363f

Amount of Each Disbursement this Period

3300.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. PHILIP SINGLETON FOR CONGRESS

Mailing Address 55 HAZELRIDGE LN

City SHARPSBURG State GA Zip Code 30277-1930

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
SINGLETON, PHILIP, JERALD, ,

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼  
State: GA District: 03

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2024

FEC Identification Number

C C00647891

Transaction ID : BC59A209BD

Amount of Each Disbursement this Period

1700.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. THE PAT HARRIGAN COMMITTEE

Mailing Address PO BOX 97275

City RALEIGH State NC Zip Code 27624-7275

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
HARRIGAN, PAT, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼  
State: NC District: 10

Date of Disbursement

MM / DD / YYYY  
03 / 18 / 2024

FEC Identification Number

C C00802298

Transaction ID : B8FB1B7410

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

6000.00

# 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)  
**OLD BREED PAC**

**A. VICTORIA SPARTZ FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 505

City NOBLESVILLE State IN Zip Code 46061-0505

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name SPARTZ, VICTORIA, , ,

Office Sought:  House  Senate  President  
State: IN District: 05

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 03 / 29 / 2024

FEC Identification Number: C00737767  
Transaction ID : BA8EBB6AEI  
Amount of Each Disbursement this Period: 2000.00

Category/Type: 011

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: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Category/Type:

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: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Category/Type:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22000.00

**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)  
**OLD BREED PAC**

**A. COBB VETERANS MEMORIAL FOUNDATION**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 01 / 31 / 2024

Mailing Address 4710 HOPEWELL MANOR DR

City CUMMING State GA Zip Code 30028-4033

Purpose of Disbursement: DONATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : B62010539FC

Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. GASPER FOR GWINNETT**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 01 / 31 / 2024

Mailing Address 950 CHIVENCESTER CT

City SUWANEE State GA Zip Code 30024-7659

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : BEE2021EB7

Amount of Each Disbursement this Period: 2000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address

City State Zip Code

Purpose of Disbursement

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4500.00