

# 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.   
**John Bolton Super PAC**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)   
   -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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:  
 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)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Cabell Hobbs

Signature of Treasurer Cabell Hobbs [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**John Bolton Super PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="1636225.92"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1865703.40"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="191710.27"/>	<input type="text" value="632399.93"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2057413.67"/>	<input type="text" value="2268625.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22328.39"/>	<input type="text" value="233540.57"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2035085.28"/>	<input type="text" value="2035085.28"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

John Bolton Super PAC

Report Covering the Period: From: 05 / 01 / 2016 To: 05 / 31 / 2016

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).....	191450.00	629958.00
(ii) Unitemized .....	256.00	971.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	191706.00	630929.00
(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) .....	191706.00	630929.00
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	72.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	4.27	1398.93
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))..... ▶	191710.27	632399.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	191710.27	632399.93

**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 .....	22328.39	223540.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	22328.39	223540.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	10000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	22328.39	233540.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22328.39	233540.57

**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) .....	191706.00	630929.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	191706.00	630929.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	22328.39	223540.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	72.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	22328.39	223468.57

**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 16  
(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)  
**John Bolton Super PAC**

**A. MR. G. NICHOLAS BECKWITH III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address ONE LITTLE LANE  
 City PITTSBURGH State PA Zip Code 15215-1552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ARCH STREET MANAGEMENT, L.L.C. Occupation CHAIRMAN & C.E.O.  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 10000.00

Date of Receipt 05 / 23 / 2016  
**Transaction ID : SA11A.123236**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 CONTRIBUTION

**B. MR. BRADLEY M. BLOOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 ALBION ROAD  
 City WELLESLEY State MA Zip Code 02481-1304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BERKSHIRE PARTNERS, L.L.C. Occupation EXECUTIVE/INVESTMENTS  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 25000.00

Date of Receipt 05 / 04 / 2016  
**Transaction ID : SA11A.122519**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 CONTRIBUTION

**C. MR. PATRICK BYRNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 BITNER ROAD  
 City PARK CITY State UT Zip Code 84098-5489  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OVERSTOCK.COM Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 15400.00

Date of Receipt 05 / 18 / 2016  
**Transaction ID : SA11A.122692**  
 Amount of Each Receipt this Period 12700.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 47700.00  
**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 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. MR. PATRICK BYRNE**

Mailing Address 700 BITNER ROAD

City State Zip Code  
PARK CITY UT 84098-5489

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

Name of Employer Occupation  
OVERSTOCK.COM C.E.O.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2016  
**Transaction ID : SA11A.122693**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. BARRY S. FRIEDBERG**

Mailing Address 134 E. 71ST STREET

City State Zip Code  
NEW YORK NY 10021-5011

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

Name of Employer Occupation  
FRIEDBERG MILSTEIN FINANCE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2016  
**Transaction ID : SA11A.122725**

Amount of Each Receipt this Period  
15000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 992 S 4TH AVE 100-512

City State Zip Code  
BRIGHTON CO 80601-6802

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

Name of Employer Occupation  
SELF NATURAL RESOURCES

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2016  
**Transaction ID : SA11A.124842**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 17750.00

**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 8 OF 16  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. MR. RIC KAYNE**

Mailing Address 1800 AVENUE OF THE STARS 3RD FLR

City	State	Zip Code
LOS ANGELES	CA	90067-4201

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

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFF	INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05	/	23	/	2016

**Transaction ID : SA11A.123237**

Amount of Each Receipt this Period  
15000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2100 WASHINGTON STREET

City	State	Zip Code
SAN FRANCISCO	CA	94109-2845

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05	/	18	/	2016

**Transaction ID : SA11A.122694**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. MICHAEL L. MOSKOWITZ**

Mailing Address 16 E. 34TH ST RM 1201

City	State	Zip Code
NEW YORK	NY	10016-4363

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

Name of Employer	Occupation
WELTMAN & MOSKOWITZ, L.L.P.	PARTNER/FINANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05	/	04	/	2016

**Transaction ID : SA11A.122518**

Amount of Each Receipt this Period  
10000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	26000.00
<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. MR. GEOFF PALMER**

Mailing Address 270 N. CANON DRIVE  
PENTHOUSE

City State Zip Code  
BEVERLY HILLS CA 90210-5312

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

Name of Employer Occupation  
GH PALMER ASSOCIATES REAL ESTATE DEVELOPER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2016  
**Transaction ID : SA11A.122695**

Amount of Each Receipt this Period  
 100000.00

Memo Item  
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	191450.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. SARAH TINSLEY**

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2016

Transaction ID : **SB21B.8090**

Amount of Each Disbursement this Period

3511.54

Memo Item

Full Name (Last, First, Middle Initial)

**B. SARAH TINSLEY**

Mailing Address 1730 M STREET NW STE 611

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2016

Transaction ID : **SB21B.8094**

Amount of Each Disbursement this Period

2506.15

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 06 / 2016

Transaction ID : **SB21B.8087**

Amount of Each Disbursement this Period

59.95

Memo Item

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

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

6077.64

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 26 / 2016

Transaction ID : SB21B.8092

Amount of Each Disbursement this Period

2012.41

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 26 / 2016

Transaction ID : SB21B.8093

Amount of Each Disbursement this Period

1220.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address 200 VESEY STREET  
50TH FLOOR

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2016

Transaction ID : SB21B.8086

Amount of Each Disbursement this Period

939.78

Memo Item

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

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

4172.39

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. BB&T - VISA**

Mailing Address PO BOX 580340

City CHARLOTTE State NC Zip Code 28258

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2016

Transaction ID : SB21B.8098

Amount of Each Disbursement this Period

1668.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. LOEWS HOTELS**

Mailing Address 667 MADISON AVENUE

City NEW YORK State NY Zip Code 10065

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  
05 / 30 / 2016

Transaction ID : SB21B.8100

Amount of Each Disbursement this Period

782.65

Memo Item

Full Name (Last, First, Middle Initial)

**C. PMI MONTHLY PARKING**

Mailing Address 1227 20TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
PARKING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2016

Transaction ID : SB21B.8109

Amount of Each Disbursement this Period

272.00

Memo Item

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

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

1668.60

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2016

Transaction ID : SB21B.8101

Amount of Each Disbursement this Period

71.66

Memo Item

Full Name (Last, First, Middle Initial)

**B. STAPLES**

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2016

Transaction ID : SB21B.8102

Amount of Each Disbursement this Period

92.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. STAPLES**

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2016

Transaction ID : SB21B.8111

Amount of Each Disbursement this Period

256.90

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD, STE. 400

City State Zip Code  
TYSONS CORNER VA 22182

Purpose of Disbursement  
DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.8081**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. COMPLIANCE CONSULTING LLC**

Mailing Address PO BOX 365

City State Zip Code  
MCLEAN VA 22101

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

/  /

**Transaction ID : SB21B.8082**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. COMPLIANCE CONSULTING LLC**

Mailing Address PO BOX 365

City State Zip Code  
MCLEAN VA 22101

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

/  /

**Transaction ID : SB21B.8096**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. EAGLE BANK**

Mailing Address 1425 K STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2016

Transaction ID : **SB21B.8083**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. EAGLE BANK**

Mailing Address 1425 K STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2016

Transaction ID : **SB21B.8085**

Amount of Each Disbursement this Period

40.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HILLTOP CONSULTANTS**

Mailing Address 4201 CONNECTICUT AVENUE NW, STE. 5

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement  
COMPUTER SERVICES/SUPPORT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2016

Transaction ID : **SB21B.8089**

Amount of Each Disbursement this Period

88.56

Memo Item

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

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

178.56

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. HOLLOWAY CONSULTING, INC.**

Mailing Address 2300 CLARENDON BLVD. STE. 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2016

Transaction ID : SB21B.8088

Amount of Each Disbursement this Period

2109.98

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOLLOWAY CONSULTING, INC.**

Mailing Address 2300 CLARENDON BLVD. STE. 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2016

Transaction ID : SB21B.8097

Amount of Each Disbursement this Period

2000.00

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

4109.98

22221.90