

# 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**  
**EMPIRE STRIKE 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 C00814897** 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  /  /  2023 through  /  /  2023

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  /  /  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.

SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

EMPIRE STRIKE PAC

Report Covering the Period: From: 07 / 01 / 2023 To: 12 / 31 / 2023

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2023		11889.43
(b) Cash on Hand at Beginning of Reporting Period.....	3744.43	
(c) Total Receipts (from Line 19) .....	35807.20	46042.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	39551.63	57931.63
7. Total Disbursements (from Line 31).....	23840.60	42220.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	15711.03	15711.03
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

**EMPIRE STRIKE 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).....	15000.00	15000.00
(ii) Unitemized .....	807.20	807.20
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15807.20	15807.20
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	30235.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	35807.20	46042.20
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	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)).....▶	35807.20	46042.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	35807.20	46042.20

**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 .....	10704.74	13884.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10704.74	13884.74
22. Transfers to Affiliated/Other Party Committees.....	1081.57	1081.57
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12054.29	27254.29
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	0.00
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)) ..	23840.60	42220.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23840.60	42220.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	35807.20	46042.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35807.20	46042.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	10704.74	13884.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10704.74	13884.74

**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 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**EMPIRE STRIKE PAC**

**A. GORTON, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 126 ULTRA DR  
 City HENDERSON State NV Zip Code 89074-8306  
 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  
 10 / 07 / 2023  
**Transaction ID : A9F6DBA8FF0AE48D6A73**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. SINGH, HARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 134 I U WILLETS ROAD  
 City OLD WESTBURY State NY Zip Code 11568-1521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BOLLA OIL CORP Occupation (for Individual) PRESIDENT  
 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  
 09 / 27 / 2023  
**Transaction ID : AC3C7BF1411B842659E4**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. YAMALI, BUTCH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 SAINT JOHNS PLACE  
 City FREEPORT State NY Zip Code 11520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MT. SINAI SOUTH NASSAU Occupation (for Individual) BOARD MEMBER  
 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 / 07 / 2023  
**Transaction ID : A913572FC307341BF842**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	15000.00

**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 19
<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)  
**EMPIRE STRIKE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HISPANIC LEADERSHIP TRUST**

Mailing Address 1005 CONGRESS AVE  
STE 400

City AUSTIN State TX Zip Code 78701-2469

FEC ID number of contributing federal political committee. **C** C00809970

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 11 / 2023  
**Transaction ID : AA019AA3A8A2C465B94C**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NATIONAL ASSOCIATION OF REALTORS PAC**

Mailing Address 430 N MICHIGAN AVE

City CHICAGO State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 22 / 2023  
**Transaction ID : A2818CF745BF948B2A31**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. THE COUNCIL OF INSURANCE AGENTS & BROKERS PAC**

Mailing Address 701 PENNSYLVANIA AVE NW  
STE 750

City WASHINGTON State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 19 / 2023  
**Transaction ID : A0CB8A0B501564AD7BB7**

Amount of Each Receipt this Period  
5000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
<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)  
**EMPIRE STRIKE PAC**

**A. UNITED PARCEL SERVICE INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 GLENLAKE PKWY

City ATLANTA	State GA	Zip Code 30328-3474
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FEC ID number of contributing federal political committee. **C** C00064766

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
10	/	11	/	2023

**Transaction ID : AE7277DFFF6F24A22AB5**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.**  
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 M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

**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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> 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)  
**EMPIRE STRIKE PAC**

**A. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 96001

City LOS ANGELES State CA Zip Code 90096-8000

Purpose of Disbursement CREDIT CARD PAYMENT  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 01 / 2023

FEC Identification Number: C  
Transaction ID : B04A1EBC95  
Amount of Each Disbursement this Period: 480.90

Memo Item

**B. BELLAGIO HOTEL**

Full Name (Last, First, Middle Initial)  
Mailing Address 3600 S LAS VEGAS BLVD

City LAS VEGAS State NV Zip Code 89109-4303

Purpose of Disbursement TRAVEL  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 01 / 2023

FEC Identification Number: C  
Transaction ID : B7B29DC889!  
Amount of Each Disbursement this Period: 480.90

Memo Item

**C. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 96001

City LOS ANGELES State CA Zip Code 90096-8000

Purpose of Disbursement CREDIT CARD PAYMENT  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 01 / 2023

FEC Identification Number: C  
Transaction ID : B7450C3A77  
Amount of Each Disbursement this Period: 2904.69

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3385.59

**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)  
**EMPIRE STRIKE PAC**

**A. BELLAGIO HOTEL**

Full Name (Last, First, Middle Initial)

Mailing Address 3600 S LAS VEGAS BLVD

City LAS VEGAS State NV Zip Code 89109-4303

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2023

FEC Identification Number: C

Transaction ID : BC406D658D

Amount of Each Disbursement this Period: 2904.69

Memo Item

**B. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 96001

City LOS ANGELES State CA Zip Code 90096-8000

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 26 / 2023

FEC Identification Number: C

Transaction ID : B437B6D624f

Amount of Each Disbursement this Period: 233.92

Memo Item

**C. BELLAGIO HOTEL**

Full Name (Last, First, Middle Initial)

Mailing Address 3600 S LAS VEGAS BLVD

City LAS VEGAS State NV Zip Code 89109-4303

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 26 / 2023

FEC Identification Number: C

Transaction ID : B3D1C8CC3

Amount of Each Disbursement this Period: 233.92

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 233.92

**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)  
**EMPIRE STRIKE PAC**

Full Name (Last, First, Middle Initial)

### A. ANEDOT

Mailing Address 1340 POYDRAS STREET SUITE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement CREDIT CARD FEES  
Candidate Name  
Category/Type 001

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

Date of Disbursement  
MM / DD / YYYY  
09 / 30 / 2023

FEC Identification Number  
C  
Transaction ID : B2FE2366CB  
Amount of Each Disbursement this Period  
200.30

Memo Item

Full Name (Last, First, Middle Initial)

### B. ANEDOT

Mailing Address 1340 POYDRAS STREET SUITE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement CREDIT CARD FEES  
Candidate Name  
Category/Type 001

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

Date of Disbursement  
MM / DD / YYYY  
10 / 31 / 2023

FEC Identification Number  
C  
Transaction ID : B33D99EBE8  
Amount of Each Disbursement this Period  
200.30

Memo Item

Full Name (Last, First, Middle Initial)

### C. ANEDOT

Mailing Address 1340 POYDRAS STREET SUITE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement CREDIT CARD FEES  
Candidate Name  
Category/Type 001

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

Date of Disbursement  
MM / DD / YYYY  
12 / 31 / 2023

FEC Identification Number  
C  
Transaction ID : B43344B490  
Amount of Each Disbursement this Period  
244.59

Memo Item

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

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

645.19

# 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)  
**EMPIRE STRIKE PAC**

**A. ARISTOTLE INTERNATIONAL**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 716045

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement DATABASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2023

FEC Identification Number: C

Transaction ID : B46175EA2C

Amount of Each Disbursement this Period: 750.00

Memo Item

**B. ARISTOTLE INTERNATIONAL**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 716045

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement DATABASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2023

FEC Identification Number: C

Transaction ID : B7863DD2CD

Amount of Each Disbursement this Period: 3000.00

Memo Item

**C. 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: 07 / 25 / 2023

FEC Identification Number: C

Transaction ID : BC3BE9F44C

Amount of Each Disbursement this Period: 350.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4100.00

**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)  
**EMPIRE STRIKE 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  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 08 / 09 / 2023

FEC Identification Number: C

Transaction ID : B36EE21D99

Amount of Each Disbursement this Period: 300.00

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  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 09 / 08 / 2023

FEC Identification Number: C

Transaction ID : B195D678257

Amount of Each Disbursement this Period: 10.00

Memo Item

**C. 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  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 09 / 12 / 2023

FEC Identification Number: C

Transaction ID : B0DC65E840

Amount of Each Disbursement this Period: 305.04

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 615.04

**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)  
**EMPIRE STRIKE PAC**

Full Name (Last, First, Middle Initial) <b>A. AXCAPITAL, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2023
Mailing Address 800 W 47TH ST STE 200		FEC Identification Number C [REDACTED] <b>Transaction ID : BF71CDCC4E</b>
City KANSAS CITY	State MO	Zip Code 64112-1244
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 5.00
Candidate Name		<input type="checkbox"/> Memo Item
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AXCAPITAL, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2023
Mailing Address 800 W 47TH ST STE 200		FEC Identification Number C [REDACTED] <b>Transaction ID : BD397FE741:</b>
City KANSAS CITY	State MO	Zip Code 64112-1244
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 300.00
Candidate Name		<input type="checkbox"/> Memo Item
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AXCAPITAL, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2023
Mailing Address 800 W 47TH ST STE 200		FEC Identification Number C [REDACTED] <b>Transaction ID : B398C93DFE</b>
City KANSAS CITY	State MO	Zip Code 64112-1244
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 195.00
Candidate Name		<input type="checkbox"/> Memo Item
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) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<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)

<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)  
**EMPIRE STRIKE PAC**

Full Name (Last, First, Middle Initial) <b>A. AXCAPITAL, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2023
Mailing Address 800 W 47TH ST STE 200		FEC Identification Number C [REDACTED] <b>Transaction ID : B518FEEB8E</b>
City KANSAS CITY	State MO	Zip Code 64112-1244
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 350.00
Candidate Name		<input type="checkbox"/> Memo Item
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AXCAPITAL, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2023
Mailing Address 800 W 47TH ST STE 200		FEC Identification Number C [REDACTED] <b>Transaction ID : B60EFEE97D</b>
City KANSAS CITY	State MO	Zip Code 64112-1244
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 300.00
Candidate Name		<input type="checkbox"/> Memo Item
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AXCAPITAL, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 11 / 2023
Mailing Address 800 W 47TH ST STE 200		FEC Identification Number C [REDACTED] <b>Transaction ID : B9357F2F1C</b>
City KANSAS CITY	State MO	Zip Code 64112-1244
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 300.00
Candidate Name		<input type="checkbox"/> Memo Item
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) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10429.74

**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 checked="" 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)  
**EMPIRE STRIKE PAC**

**A. DESPOSITO VICTORY FUND**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 183

City HUDSON State WI Zip Code 54016

Purpose of Disbursement  
TRANSFER TO AUTHORIZED COMMITTEE

Candidate Name  
DESPOSITO VICTORY FUND

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2023

FEC Identification Number: C C00814905  
Transaction ID : B45956B522

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. DESPOSITO VICTORY FUND**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 183

City HUDSON State WI Zip Code 54016

Purpose of Disbursement  
TRANSFER TO AUTHORIZED COMMITTEE

Candidate Name  
DESPOSITO VICTORY FUND

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2023

FEC Identification Number: C C00814905  
Transaction ID : BCE2A16246I

Amount of Each Disbursement this Period: 81.57

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1081.57
<b>TOTAL</b> This Period (last page this line number only).....▶	1081.57

**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)  
**EMPIRE STRIKE PAC**

Full Name (Last, First, Middle Initial) <b>A. DESPOSITO FOR NEW YORK</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2023
Mailing Address PO BOX 188		FEC Identification Number C C00809426 <b>Transaction ID : B4264D4F75I</b> Amount of Each Disbursement this Period 165.00
City ISLAND PARK	State NY	
Zip Code 11558-0188	Purpose of Disbursement POLITICAL CONTRIBUTION	Memo Item <input type="checkbox"/>
Candidate Name DESPOSITO, ANTHONY, P, ,	Category/Type 011	
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: NY	District: 04	

Full Name (Last, First, Middle Initial) <b>B. DESPOSITO FOR NEW YORK</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2023
Mailing Address PO BOX 188		FEC Identification Number C C00809426 <b>Transaction ID : BC7DA15D06</b> Amount of Each Disbursement this Period 39.29
City ISLAND PARK	State NY	
Zip Code 11558-0188	Purpose of Disbursement POLITICAL CONTRIBUTION	Memo Item <input type="checkbox"/>
Candidate Name DESPOSITO, ANTHONY, P, ,	Category/Type 011	
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: NY	District: 04	

Full Name (Last, First, Middle Initial) <b>C. DESPOSITO FOR NEW YORK</b>		Date of Disbursement MM / DD / YYYY 10 / 26 / 2023
Mailing Address PO BOX 188		FEC Identification Number C C00809426 <b>Transaction ID : B0AEB99BA</b> Amount of Each Disbursement this Period 250.00
City ISLAND PARK	State NY	
Zip Code 11558-0188	Purpose of Disbursement POLITICAL CONTRIBUTION	Memo Item <input type="checkbox"/>
Candidate Name DESPOSITO, ANTHONY, P, ,	Category/Type 011	
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: NY	District: 04	

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

454.29

**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, where 23 is checked.

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NAME OF COMMITTEE (In Full)
EMPIRE STRIKE PAC

Form A: LAWLER FOR CONGRESS. 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: MAZI FOR CONGRESS. 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: MAZI FOR CONGRESS. 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) and TOTAL This Period (last page this line number only) summary rows.

# 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)  
**EMPIRE STRIKE PAC**

**A. NICOLE FOR NEW YORK**

Full Name (Last, First, Middle Initial)  
NICOLE FOR NEW YORK

Date of Disbursement: MM / DD / YYYY  
12 / 23 / 2023

Mailing Address PO BOX 60487

City: STATEN ISLAND State: NY Zip Code: 10306-0487

Purpose of Disbursement: POLITICAL CONTRIBUTION  
Category/Type: 011

Candidate Name: MALLIOTAKIS, NICOLE, , ,

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

State: NY District: 11

FEC Identification Number: C C00694778  
Transaction ID : B5D7D8E0DE  
Amount of Each Disbursement this Period: 3300.00

Memo Item

**B. NICOLE FOR NEW YORK**

Full Name (Last, First, Middle Initial)  
NICOLE FOR NEW YORK

Date of Disbursement: MM / DD / YYYY  
12 / 23 / 2023

Mailing Address PO BOX 60487

City: STATEN ISLAND State: NY Zip Code: 10306-0487

Purpose of Disbursement: POLITICAL CONTRIBUTION  
Category/Type: 011

Candidate Name: MALLIOTAKIS, NICOLE, , ,

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

State: NY District: 11

FEC Identification Number: C C00694778  
Transaction ID : B33B0A6BF4  
Amount of Each Disbursement this Period: 3300.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement  
Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  
 Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C  
Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	12054.29