

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

BIT PAC

ADDRESS (number and street) 441 North Lee Street, Suite 100

Check if different than previously reported. (ACC) Alexandria VA 22314

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

C C00668178

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) |
|--|---------------------------------------|--|

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

5. Covering Period M M / D D / Y Y Y Y Y Y 04 / 01 / 2018 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2018

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

Backer, Dan, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Backer, Dan, , ,* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 13 / 2018

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)

Page 2

Write or Type Committee Name

BIT 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="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="117622.40"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1560.57"/>	<input type="text" value="144781.41"/>
(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="119182.97"/>	<input type="text" value="144781.41"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="44091.83"/>	<input type="text" value="69690.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="75091.14"/>	<input type="text" value="75091.14"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

BIT 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).....	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.....	0.00	154733.83
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.....	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	- 939.43	- 12452.42
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)).....▶	1560.57	144781.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1560.57	144781.41

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	19741.83	33940.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19741.83	33940.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24350.00	35750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	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)) ..	44091.83	69690.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44091.83	69690.27

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)	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))	19741.83	33940.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19741.83	33940.27

**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 20
<input 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 checked="" 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)
BIT PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BIT PAC

Mailing Address 441 North Lee Street, Suite 100

City Alexandria	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C** C00668178

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
- 1994.34

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2018

Transaction ID : SA17.4195

Amount of Each Receipt this Period

- 939.43

 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	/	D D	/	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	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

--

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	- 939.43
TOTAL This Period (last page this line number only).....▶	- 939.43

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : SA17.4195

Cash on hand adjustment to account for the decrease in value of the Committee's 1.9978 Bitcoins (BTC). The Committee's bitcoins decreased in value a total of \$939.43 from the 3/31/18 price of \$6,855.61 per BTC to the 6/30/18 price of \$ 6,385.38 per BTC.

Form/Schedule:

Transaction ID:

**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 20
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BIT PAC

A. GREG PENCE FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 218

City SHELBYVILLE	State IN	Zip Code 46176
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FEC ID number of contributing federal political committee. **C** H8IN06129

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2018
Transaction ID : SA16.4204

Amount of Each Receipt this Period
2500.00

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 / 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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA16

Transaction ID : SA16.4204

Refund of accidental excessive contribution.

Form/Schedule:

Transaction ID:

**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)
BIT PAC

A. Amtrack

Full Name (Last, First, Middle Initial)

Mailing Address 1 Massachusetts Ave., NW

City Washington State DC Zip Code 20001

Purpose of Disbursement Train Fare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2018

FEC Identification Number: C
Transaction ID : SB21B.4149
Amount of Each Disbursement this Period: 790.00

Memo Item

B. Crane and Grey

Full Name (Last, First, Middle Initial)

Mailing Address 4776 w 150 n

City La Porte State IN Zip Code 46350

Purpose of Disbursement Graphic Design

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 03 / 2018

FEC Identification Number: C
Transaction ID : SB21B.4137
Amount of Each Disbursement this Period: 2000.00

Memo Item

C. PAC Management Services LLC

Full Name (Last, First, Middle Initial)

Mailing Address 500 Montgomery St. Ste. 400

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 01 / 2018

FEC Identification Number: C
Transaction ID : SB21B.4141
Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4790.00

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)
BIT PAC

Full Name (Last, First, Middle Initial) A. PAC Management Services LLC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018	
Mailing Address 500 Montgomery St. Ste. 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4167 Amount of Each Disbursement this Period 2000.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement Compliance Services			
Candidate Name		Memo Item <input type="checkbox"/>	
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. PAC Management Services LLC		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018	
Mailing Address 500 Montgomery St. Ste. 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4182 Amount of Each Disbursement this Period 2000.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement Compliance Services			
Candidate Name		Memo Item <input type="checkbox"/>	
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) C. political.law		Date of Disbursement MM / DD / YYYY 04 / 06 / 2018	
Mailing Address 441 North Lee Street, Suite 300		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4138 Amount of Each Disbursement this Period 24.63	
City Alexandria	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement Reimbursements (see below)			
Candidate Name		Memo Item <input type="checkbox"/>	
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: _____		

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

4024.63

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)
BIT PAC

Full Name (Last, First, Middle Initial)

A. GoDaddy

Mailing Address 14455 N. Hayden Rd #219

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement
Domain and Hosting Fees

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4138.1
Amount of Each Disbursement this Period
24.63

Memo Item

Full Name (Last, First, Middle Initial)

B. political.law

Mailing Address 441 North Lee Street, Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4139
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. political.law

Mailing Address 441 North Lee Street, Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4144
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

4000.00

**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)
BIT PAC

Full Name (Last, First, Middle Initial) A. political.law		Date of Disbursement MM / DD / YYYY 05 / 09 / 2018
Mailing Address 441 North Lee Street, Suite 300		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4147 Amount of Each Disbursement this Period [REDACTED] 970.90
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Reimbursements (see below)		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AC Hotel		Date of Disbursement MM / DD / YYYY 05 / 09 / 2018
Mailing Address 260 W 40th St		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4147.c Amount of Each Disbursement this Period [REDACTED] 970.90
City New York	State NY	Zip Code 10018
Purpose of Disbursement Lodging		Category/ Type [REDACTED]
Candidate Name		
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. political.law		Date of Disbursement MM / DD / YYYY 06 / 08 / 2018
Mailing Address 441 North Lee Street, Suite 300		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4172 Amount of Each Disbursement this Period [REDACTED] 2000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Legal Services		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2970.90
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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)
BIT PAC

A. political.law

Full Name (Last, First, Middle Initial)

Mailing Address 441 North Lee Street, Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Reimbursements (see below)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4174

Amount of Each Disbursement this Period

1937.30

Memo Item

B. GoGreen Cab

Full Name (Last, First, Middle Initial)

Mailing Address 4917 Brenman Park Dr

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Taxi Fare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4174.C

Amount of Each Disbursement this Period

45.00

Memo Item

C. UpWork

Full Name (Last, First, Middle Initial)

Mailing Address 441 Logue Avenue

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
IT Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4174.

Amount of Each Disbursement this Period

1892.30

Memo Item

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

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

1937.30

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)
BIT PAC

A. political.law

Full Name (Last, First, Middle Initial)

Mailing Address 441 North Lee Street, Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 28 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4181

Amount of Each Disbursement this Period: 2000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

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)..... ▶ 2000.00

TOTAL This Period (last page this line number only)..... ▶ 19722.83

**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)
BIT PAC

A. BIKERS FOR THE PRESIDENT PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 203 South Union Street Suite 300

M M M	/	D D D	/	Y Y Y Y Y
05		17		2018

City Alexandria State VA Zip Code 22314

FEC Identification Number

Purpose of Disbursement Contribution

C	
---	--

Candidate Name

Transaction ID : SB23.4159

Amount of Each Disbursement this Period

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

				1000.00

Memo Item

B. Deb Fischer for US Senate Inc.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5555 SOUTH ST

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

City LINCOLN State NE Zip Code 68506

FEC Identification Number

Purpose of Disbursement Contribution

C	S2NE00094
---	-----------

Candidate Name

Transaction ID : SB23.4146

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: NE District: 00

				2000.00

Memo Item

C. GREG PENCE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 218

M M M	/	D D D	/	Y Y Y Y Y
06		11		2018

City SHELBYVILLE State IN Zip Code 46176

FEC Identification Number

Purpose of Disbursement Contribution

C	H8IN06129
---	-----------

Candidate Name

Transaction ID : SB23.4173

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: IN District: 06

				2500.00

Memo Item

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

				5500.00

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

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**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)
BIT PAC

Full Name (Last, First, Middle Initial) A. Jeff Dove for Congress		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address P.O. Box 4673		FEC Identification Number C H8VA11070 Transaction ID : SB23.4163 Amount of Each Disbursement this Period 1000.00
City Woodbridge	State VA	
Zip Code 22194		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name DOVE, JEFFERY, ANTHONY, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 11	

Full Name (Last, First, Middle Initial) B. Jim Jordan For Congress		Date of Disbursement MM / DD / YYYY 05 / 03 / 2018
Mailing Address 1709 State Route 560 South		FEC Identification Number C H6OH04082 Transaction ID : SB23.4143 Amount of Each Disbursement this Period 750.00
City Urbana	State OH	
Zip Code 43078		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name JORDAN, JAMES D., , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 04	

Full Name (Last, First, Middle Initial) C. Josh Hawley for Senate		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address 150 Long Road Suite 50		FEC Identification Number C S8MO00160 Transaction ID : SB23.4153 Amount of Each Disbursement this Period 2700.00
City Chesterfield	State MO	
Zip Code 63005		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name HAWLEY, JOSHUA DAVID, , ,		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO	District: 00	

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

4450.00

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)
BIT PAC

A. JULIO GONZALEZ FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 133 SOUTH HARBOR DRIVE

City VENICE State FL Zip Code 34285

Purpose of Disbursement Contribution

Candidate Name **GONZALEZ, JULIO, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 17

Date of Disbursement: 06 / 07 / 2018

FEC Identification Number: **C H8FL17046**
Transaction ID : **SB23.4169**
Amount of Each Disbursement this Period: 500.00

Memo Item

B. Justin Amash For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 1500 E BELTLINE AVE SE STE 250

City GRAND RAPIDS State MI Zip Code 49506

Purpose of Disbursement Contribution

Candidate Name **AMASH, JUSTIN, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MI District: 03

Date of Disbursement: 05 / 31 / 2018

FEC Identification Number: **C H0MI03126**
Transaction ID : **SB23.4166**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. LOUDERMILK FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 447

City CASSVILLE State GA Zip Code 30123

Purpose of Disbursement Contribution

Candidate Name **LOUDERMILK, BARRY, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: GA District: 11

Date of Disbursement: 06 / 22 / 2018

FEC Identification Number: **C H4GA11061**
Transaction ID : **SB23.4176**
Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2000.00

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)
BIT PAC

Full Name (Last, First, Middle Initial) A. Mike Braun for Indiana		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address 505 Main St.		FEC Identification Number C S8IN00171 Transaction ID : SB23.4157 Amount of Each Disbursement this Period 2700.00
City Jasper	State IN	
Zip Code 47546	Purpose of Disbursement Contribution	Memo Item <input type="checkbox"/>
Candidate Name BRAUN, MIKE, , ,	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 00	

Full Name (Last, First, Middle Initial) B. Mustang PAC		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address PO BOX 4		FEC Identification Number C Transaction ID : SB23.4180 Amount of Each Disbursement this Period 2500.00
City WESTFIELD	State IN	
Zip Code 46074	Purpose of Disbursement Contribution	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. New York State Republican Party		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 122 East 83rd Street, 2nd		FEC Identification Number C Transaction ID : SB23.4161 Amount of Each Disbursement this Period 2000.00
City New York	State NY	
Zip Code 10028	Purpose of Disbursement Contribution	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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

7200.00

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)
BIT PAC

A. Renacci for Senate

Full Name (Last, First, Middle Initial)
Mailing Address 150 Smokerise Drive

City Wadsworth State OH Zip Code 44281

Purpose of Disbursement Contribution

Candidate Name **RENACCI, JAMES B, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: OH District: 00

Date of Disbursement: 05 / 15 / 2018

FEC Identification Number: **C S8OH00102**
Transaction ID : **SB23.4155**
Amount of Each Disbursement this Period: 2700.00

Memo Item

B. The Guardian Fund

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 9383

City Coral Spings State FL Zip Code 33075

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 07 / 2018

FEC Identification Number: **C**
Transaction ID : **SB23.4171**
Amount of Each Disbursement this Period: 2500.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement Contribution

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)..... ▶ 5200.00

TOTAL This Period (last page this line number only)..... ▶ 24350.00