

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name Patriotic Veterans, Inc.

(b) Address (number and street) check if different than previously reported
546 N Dearborn P.O.B 101239

(c) City, State and ZIP Code Chicago, IL 60610

(d) Name of Employer or Principal/Place of Business _____ (e) Occupation _____

2. FEC Identification Number **C30001978**

3. Is This Statement New or Amended

4. Covering Period **11/01/2022** through **11/07/2022**

5. (a) Date of Public Distribution(s) **11/01/2022** (b) Communication Title Adios

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)
 (d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15
 (e) Other, specify: 501 (c) 4

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name D Paul Caprio

(b) Address (number and street) 155 W Main St. #302

(c) City, State and ZIP Code Columbus, Ohio 43215

(d) Name of Employer or Principal Place of Business _____ (e) Occupation Paul Caprio Assoc. Sole Proprietor

9. Total Donations This Statement **42,000**

10. Total Disbursements/Obligations This Statement **42,000**

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM D Paul Caprio

SIGNATURE D. Paul Caprio DATE 10-30-22

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

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

PAGE 2 OF

11. Person(s) Sharing/Exercising Control

A.	(a) Name <u>D. Paul Caprio</u>
	(b) Address (number and street) <u>155 W. Main St. #302</u>
	(c) City, State and ZIP Code <u>Columbus, Ohio 43215</u>
	(d) Name of Employer or Principal Place of Business <u>Paul Caprio Assoc.</u>
	(e) Occupation <u>Sole Proprietor</u>
B.	(a) Name
	(b) Address (number and street)
	(c) City, State and ZIP Code
	(d) Name of Employer or Principal Place of Business
	(e) Occupation
C.	(a) Name
	(b) Address (number and street)
	(c) City, State and ZIP Code
	(d) Name of Employer or Principal Place of Business
	(e) Occupation
D.	(a) Name
	(b) Address (number and street)
	(c) City, State and ZIP Code
	(d) Name of Employer or Principal Place of Business
	(e) Occupation
E.	(a) Name
	(b) Address (number and street)
	(c) City, State and ZIP Code
	(d) Name of Employer or Principal Place of Business
	(e) Occupation

SCHEDULE 9-A
Donation(s) Received

PAGE OF

A. Full Name of Donor

Restoration Pac

Mailing Address of Donor

1901 Butterfield Road #120

City

State

Zip

Downers Grove, IL 60515

Date of Receipt

10 / 14 / 2022

Amount

42000-

B. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

Amount

C. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

Amount

D. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

Amount

E. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

Amount

SUBTOTAL of Donations This Page (optional)

42000-

TOTAL This Period (last page this line number only)
(carry total from last page to Line 9)

42000-

SCHEDULE 9-B

PAGE OF

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Ad Associates / Dorothy Baker				Date of Disbursement or Obligation 11 / 01 / 2022	
Mailing Address of Payee 10491 FM 2451				Amount 42,000	
City Scurry, TX		State TX		Zip Code 75158	
Name of Employer Dorothy Baker Media Consult		Occupation Media Consult		Communication Date 11 / 01 / 2022	
Purpose of Disbursement (Including title(s) of communication(s)) RADIO ADS - "ADIOS"					
Name of Federal Candidate Adam Laxalt		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		State: NV District:	
Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)					
Name of Federal Candidate		Office Sought:		State:	
Name of Federal Candidate		Office Sought:		State:	
Name of Federal Candidate		Office Sought:		State:	
B. Full Name (Last, First, Middle Initial) of Payee					
Mailing Address of Payee					
City		State		Zip Code	
Name of Employer		Occupation			
Purpose of Disbursement (Including title(s) of communication(s))					
Name of Federal Candidate		Office Sought:		State:	
Name of Federal Candidate		Office Sought:		State:	
Name of Federal Candidate		Office Sought:		State:	
Disbursement/Obligation For:					
Disbursement/Obligation For:					
Disbursement/Obligation For:					
SUBTOTAL of Disbursements/Obligations This Page (optional)				42,000	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				42,000	

Via E-Mail

Federal Election Commission	
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS	
The FEC added this page to the end of this filing to indicate how it was received.	
<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>VIA Email</i>	Date of Receipt or Postmarked <i>10/31/2022</i>
<i>WDO</i> PREPARER	<i>10/31/2022</i> DATE PREPARED

(3/2015)