

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 LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street) 1444 DUKE STREET ALEXANDRIA VA 22314

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00255695 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2024 through 07 / 31 / 2024

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Redpath, William, B, Mr,

Signature of Treasurer Redpath, William, B, Mr, Date 08 / 20 / 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

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period: From: 07 / 01 / 2024 To: 07 / 31 / 2024

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: 6. (a) Cash on Hand January 1, 2024 (270463.64); (b) Cash on Hand at Beginning of Reporting Period (349786.22); (c) Total Receipts (from Line 19) (97117.72 / 1141580.52); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (446903.94 / 1412044.16); 7. Total Disbursements (from Line 31) (97918.34 / 1063058.56); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (348985.60 / 348985.60); 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) (0.00); 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) (296834.10).

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

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period: From: 07 / 01 / 2024 To: 07 / 31 / 2024

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	59468.13	407853.11
(ii) Unitemized	36930.14	389013.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	96398.27	796866.53
(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)	96398.27	796866.53
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).....	441.45	1794.15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	278.00	342919.84
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)).....▶	97117.72	1141580.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	97117.72	1141580.52

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	92756.03	882692.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	92756.03	882692.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	10307.20
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 (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	635.58
(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	635.58
29. Other Disbursements (Including Non-Federal Donations).....	5162.31	169423.72
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)) ..	97918.34	1063058.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	97918.34	1063058.56

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)	96398.27	796866.53
34. Total Contribution Refunds (from Line 28(d))	0.00	635.58
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	96398.27	796230.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	92756.03	882692.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	441.45	1794.15
38. Net Operating Expenditures (subtract Line 37 from Line 36)	92314.58	880897.91

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 259
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Adsit, David, , ,

Mailing Address 1447 W Langston Rd

City Riverton	State UT	Zip Code 84065-6191
------------------	-------------	------------------------

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

Name of Employer (for Individual) Pluralsight	Occupation (for Individual) Software Craftsman
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2024

Transaction ID : SA11AI.253417

Amount of Each Receipt this Period
50.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Aitken, David, , Mr,

Mailing Address 1240 N OGDEN ST APT 4

City DENVER	State CO	Zip Code 80218-1930
----------------	-------------	------------------------

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 ▼
2599.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2024

Transaction ID : SA11AI.253420

Amount of Each Receipt this Period
103.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AIRwazek, Ahmed, , ,

Mailing Address 1915 QUEEN AVE N

City MINNEAPOLIS	State MN	Zip Code 55411-2409
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Toll Gas and Welding	Occupation (for Individual) Service Technician
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
729.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2024

Transaction ID : SA11AI.253434

Amount of Each Receipt this Period
5.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	158.00
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 7 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Archambault, Raymond, D, Mr, III

Mailing Address **24510 OAK GROVE LN LOT 32**

City SEDALIA	State MO	Zip Code 65301-9577
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) IDAHO AND SEDALIA TRANSPORTATION	Occupation (for Individual) RAILROAD SIGNAL TECHNICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
07 / 20 / 2024

Transaction ID : SA11AI.253453

Amount of Each Receipt this Period
125.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Atwood, Frank, Fisher, ,

Mailing Address **7094 S COSTILLA ST**

City LITTLETON	State CO	Zip Code 80120-3518
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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 ▼
1254.50

Date of Receipt
07 / 31 / 2024

Transaction ID : SA11AI.253475

Amount of Each Receipt this Period
30.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Ayres, Richard, O, Mr,

Mailing Address **1311 BRENTWOOD TER**

City Eau Claire	State WI	Zip Code 54703-1994
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) consultant
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt
07 / 20 / 2024

Transaction ID : SA11AI.253482

Amount of Each Receipt this Period
40.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Bailey, Alvin, C, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 611

City AUBURN	State AL	Zip Code 36831-6110
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt
07 / 13 / 2024
Transaction ID : SA11AI.253492

Amount of Each Receipt this Period
84.00

Memo Item
Contribution

B. Baker, Chris, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 N CAPITAL OF TEXAS HWY

City AUSTIN	State TX	Zip Code 78746-1416
----------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) entrepreneur
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
656.93

Date of Receipt
07 / 21 / 2024
Transaction ID : SA11AI.253496

Amount of Each Receipt this Period
5.21

Memo Item
Contribution

C. Baker, Chris, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 N CAPITAL OF TEXAS HWY

City AUSTIN	State TX	Zip Code 78746-1416
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) entrepreneur
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
661.93

Date of Receipt
07 / 25 / 2024
Transaction ID : SA11AI.253497

Amount of Each Receipt this Period
5.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	94.21
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 9 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Baker, Dwight, E, Mr., PE

Mailing Address 68 PERKINS RD

City CARTERSVILLE	State VA	Zip Code 23027-9747
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MITRE Corporation	Occupation (for Individual) Engineer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2024

Transaction ID : SA11AI.253500

Amount of Each Receipt this Period
50.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Baker, Josiah, , , Sr

Mailing Address 246 KING RD

City CLARKSVILLE	State TN	Zip Code 37042-5738
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Turn 14	Occupation (for Individual) Sales
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2024

Transaction ID : SA11AI.253501

Amount of Each Receipt this Period
26.05

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Baker, Stephen, John, Mr,

Mailing Address 5600 CAMERATA WAY

City ST LOUIS PARK	State MN	Zip Code 55416-5286
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Seagate Technology LLC	Occupation (for Individual) Manufacturing Specialist
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2024

Transaction ID : SA11AI.253503

Amount of Each Receipt this Period
100.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	176.05
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 10 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Baranski, Janine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5150 SUNSET DR
 City PALATINE State IL Zip Code 60067-7330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Conversa Solutions LLC Occupation (for Individual) Software Engineering Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.50

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253515
 Amount of Each Receipt this Period 51.50
 Memo Item
 Contribution

B. Barger, Wayne, William, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 306 W BETHEL SCHOOL RD
 City COPPELL State TX Zip Code 75019-3943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SmithGroup, Inc. Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.30

Date of Receipt 07 / 21 / 2024
Transaction ID : SA11AI.253518
 Amount of Each Receipt this Period 52.30
 Memo Item
 Contribution

C. Barnhart, Noah, Robert, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23034 TUSCANY AVE
 City EASTPOINTE State MI Zip Code 48021-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Triumph Occupation (for Individual) machinist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.50

Date of Receipt 07 / 04 / 2024
Transaction ID : SA11AI.253527
 Amount of Each Receipt this Period 51.50
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	155.30
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 11 OF 259
	<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Barnhouse, Nelson, Michael, Mr.,			Date of Receipt MM / DD / YYYY 07 / 01 / 2024
Mailing Address 3041 BIGGERN AVE SE			Transaction ID : SA11AI.253528
City SMYRNA	State GA	Zip Code 30082-2101	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 428.41	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barozzi, Brenda, , ,			Date of Receipt MM / DD / YYYY 07 / 18 / 2024
Mailing Address 3925 S JONES BLVD			Transaction ID : SA11AI.253529
City LAS VEGAS	State NV	Zip Code 89103-7105	Amount of Each Receipt this Period 62.52
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Kritzer Marketing		Occupation (for Individual) advertising	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 477.43	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Barozzi, Brenda, , ,			Date of Receipt MM / DD / YYYY 07 / 21 / 2024
Mailing Address 3925 S JONES BLVD			Transaction ID : SA11AI.253530
City LAS VEGAS	State NV	Zip Code 89103-7105	Amount of Each Receipt this Period 21.63
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Kritzer Marketing		Occupation (for Individual) advertising	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 499.06	

SUBTOTAL of Receipts This Page (optional).....▶	126.15
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 12 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Barrick, David, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 PAINE RD
 City HOLMES State NY Zip Code 12531-5429
 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 ▼ 500.00

Date of Receipt 07 / 15 / 2024
Transaction ID : SA11AI.253535
 Amount of Each Receipt this Period 250.00
 Memo Item
 Contribution

B. Beard, Dexter, William, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8000 ESSEX POINT CIR
 City ORLANDO State FL Zip Code 32819-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wheel City Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 06 / 2024
Transaction ID : SA11AI.253557
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

C. Bekam, Sepehr, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27068 LA PAZ RD PMB 184
 City ALISO VIEJO State CA Zip Code 92656-3041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bekam Investment Group, LLC Occupation (for Individual) Professional Real Estate Investor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.253571
 Amount of Each Receipt this Period 100.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	393.26
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 13 OF 259
<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

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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Benson, Harold, Scott, Mr.,

Mailing Address 609 PARNEL RD

City OLD HICKORY	State TN	Zip Code 37138-1016
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) n/a
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
770.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2024

Transaction ID : SA11AI.253582

Amount of Each Receipt this Period
60.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Benson, Harold, Scott, Mr.,

Mailing Address 609 PARNEL RD

City OLD HICKORY	State TN	Zip Code 37138-1016
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) n/a
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
870.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2024

Transaction ID : SA11AI.253583

Amount of Each Receipt this Period
100.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Berger, Stephen, Mark, Mr.,

Mailing Address 12946 STAUBACH WAY

City SAN ANTONIO	State TX	Zip Code 78254-2173
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Aviat Networks	Occupation (for Individual) IT Manager
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
294.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2024

Transaction ID : SA11AI.253589

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	202.00
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 14 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Bernitt, Joe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 Bald Hill Rd
 City Newfields State NH Zip Code 03856-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253595
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

B. Berns, James, Anthony, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 W NORTH BEND RD
 City CINCINNATI State OH Zip Code 45224-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Company President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 16 / 2024
Transaction ID : SA11AI.253596
 Amount of Each Receipt this Period 30.00
 Memo Item
 Contribution

C. Binsley, Andrew, William, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 LA VENTA DR
 City WESTLAKE VLG State CA Zip Code 91361-3805
 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 ▼ 852.18

Date of Receipt 07 / 03 / 2024
Transaction ID : SA11AI.253603
 Amount of Each Receipt this Period 15.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	87.00
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 15 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Blair, John, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26410 VASHON HWY SW
 City VASHON State WA Zip Code 98070-8321
 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 ▼ 1107.25

Date of Receipt 07 / 08 / 2024
Transaction ID : SA11AI.253618
 Amount of Each Receipt this Period 51.50
 Memo Item
 Contribution

B. Blair, John, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26410 VASHON HWY SW
 City VASHON State WA Zip Code 98070-8321
 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 ▼ 1210.25

Date of Receipt 07 / 23 / 2024
Transaction ID : SA11AI.253619
 Amount of Each Receipt this Period 103.00
 Memo Item
 Contribution

C. Bledsoe, Daniel, Debb, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5908 CHISHOLM TRL
 City HALTOM CITY State TX Zip Code 76148-3830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rudys BBQ Occupation (for Individual) Assistant General Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 216.83

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253625
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	159.50
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 16 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Bohler, Samuel, , ,

Mailing Address **202 GREENBRIAR CIR N**

City DAPHNE	State AL	Zip Code 36526-7957
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) IBM	Occupation (for Individual) Software Developer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **739.08**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2024

Transaction ID : SA11AI.253630

Amount of Each Receipt this Period
62.52

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Bonin, Lance, , ,

Mailing Address **10631 SARON LN**

City WHITEHOUSE	State OH	Zip Code 43571-8600
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Johns Manville	Occupation (for Individual) Portfolio Manager
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **294.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2024

Transaction ID : SA11AI.253636

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Bonke, Bryan, , ,

Mailing Address **503 BLACK WALNUT LN**

City POTTERSVILLE	State MO	Zip Code 65790-8860
-----------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **936.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2024

Transaction ID : SA11AI.253637

Amount of Each Receipt this Period
125.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	229.52
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 17 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Booth, Robert, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 MOJAVE
 City IRVINE State CA Zip Code 92602-2424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Impac Mortgage Occupation (for Individual) Mortgage Lending
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253639
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

B. Boss, Jessica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 E Howell Ave
 City Alexandria State VA Zip Code 22301-3088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) Pilot
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 07 / 05 / 2024
Transaction ID : SA11AI.253647
 Amount of Each Receipt this Period 75.00
 Memo Item
 Contribution

C. Bost, Jeanie, , Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 BYRON RD
 City GERRARDSTOWN State WV Zip Code 25420-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) none
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1028.89

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.253648
 Amount of Each Receipt this Period 21.88
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	146.88
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 18 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Bost, Travis, Lee, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 BYRON RD
 City GERRARDSTOWN State WV Zip Code 25420-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Anord Mardix Occupation (for Individual) Field Service Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.04

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.253649
 Amount of Each Receipt this Period 43.76
 Memo Item
 Contribution

B. Boston, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8206 Superior Cir
 City Littleton State CO Zip Code 80125-8447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Procure Technologies Occupation (for Individual) Principal Software Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 07 / 15 / 2024
Transaction ID : SA11AI.253650
 Amount of Each Receipt this Period 515.00
 Memo Item
 Contribution

C. Boust, Chuck, M, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CENTER RD
 City NEWVILLE State PA Zip Code 17241-9431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/a Occupation (for Individual) retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.60

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.253652
 Amount of Each Receipt this Period 62.52
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	621.28
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 19 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Bracco, Paul, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1574 ONYX DR

City TYSONS	State VA	Zip Code 22102-3961
----------------	-------------	------------------------

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

Name of Employer (for Individual) Mortgage Industry	Occupation (for Individual) Data Analyst
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
662.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2024

Transaction ID : SA11AI.253669

Amount of Each Receipt this Period
5.00

Memo Item
Contribution

B. Brace, Robert, Travis, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5668 FISHHAWK CROSSING BLVD # 127

City LITHIA	State FL	Zip Code 33547-5900
----------------	-------------	------------------------

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

Name of Employer (for Individual) Lolliepapa Farm / Sunday River	Occupation (for Individual) Farmer / Seasonal Retail
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2024

Transaction ID : SA11AI.253670

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

C. Bray, Neil, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 316 CALIFORNIA AVE # 819

City RENO	State NV	Zip Code 89509-1650
--------------	-------------	------------------------

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 ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2024

Transaction ID : SA11AI.253678

Amount of Each Receipt this Period
125.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	172.00
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 20 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Brewer, Alan, Wayne, Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12834 SE STATE ROUTE 371
 City FAUCETT State MO Zip Code 64448-8193
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mosaic Occupation (for Individual) doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2024
Transaction ID : SA11AI.253687
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

B. Brinkman, Chad, Alan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 548 8TH ST N
 City CASSELTON State ND Zip Code 58012-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John Deere Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2024
Transaction ID : SA11AI.253694
 Amount of Each Receipt this Period 62.52
 Memo Item
 Contribution

C. Brocard, Gretchen, Christa, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 496 SYBIL LN SE
 City MARIETTA State GA Zip Code 30067-7048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Top Shelf Wellness Occupation (for Individual) Nutrition coach
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 584.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2024
Transaction ID : SA11AI.253697
 Amount of Each Receipt this Period 21.88
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	126.40
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 21 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Brown, Robert, Clyde, ,

Mailing Address 1190 S BARDEAUX AVE

City Yuma	State AZ	Zip Code 85364-4134
--------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 16 / 2024

Transaction ID : SA11AI.253707

Amount of Each Receipt this Period
100.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Brumfield, Steven, Scott, Dr., MD

Mailing Address 215 SENECA RD

City HUNTINGTON	State WV	Zip Code 25705-4129
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Valley Health Systems	Occupation (for Individual) Physician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.60

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2024

Transaction ID : SA11AI.253712

Amount of Each Receipt this Period
62.52

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Brunsman, Gary, Carl, Mr.,

Mailing Address 3234 GRAYSTONE MANOR PKWY

City LOUISVILLE	State KY	Zip Code 40241-3103
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Andys Frozen Custard LLC	Occupation (for Individual) Consultant Restaurant Technology
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2024

Transaction ID : SA11AI.253714

Amount of Each Receipt this Period
50.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	212.52
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 22 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Burbank, Paul, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9909 95th St Apt 3D
 City Ozone Park State NY Zip Code 11416-2533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC FISA-OPA Occupation (for Individual) Admin. Staff Analyst // Retired 6/6/23
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 11 / 2024
Transaction ID : SA11AI.253726
 Amount of Each Receipt this Period 500.00
 Memo Item
 Contribution

B. Burket, Thomas, Gerard, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9125 WANDERING TRAIL DR
 City POTOMAC State MD Zip Code 20854-2383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Xerox Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.72

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253736
 Amount of Each Receipt this Period 32.96
 Memo Item
 Contribution

C. Burnett, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7785 Fox Ct
 City Pasadena State MD Zip Code 21122-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) General Nutrition Center/(Maryland) Na Occupation (for Individual) Salesperson/Part time soldier
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253738
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	582.96
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 23 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Burris, Michael, Ray, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 03AFY_a8WbszKQqpjAJZd_6X1dY6jyRTsW
 City Seguin State TX Zip Code 78155-7158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 25 / 2024
Transaction ID : SA11AI.253741
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

B. Bursheim, Mark, Allan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 COTTONWOOD LN
 City WICKENBURG State AZ Zip Code 85390-2394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rentokil-Terminix Occupation (for Individual) Service Supervisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 643.37

Date of Receipt 07 / 04 / 2024
Transaction ID : SA11AI.253742
 Amount of Each Receipt this Period 61.80
 Memo Item
 Contribution

C. Bush, Layla, Dawn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5523 FIRWOOD DR
 City LYNNWOOD State WA Zip Code 98036-6116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/a Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 261.18

Date of Receipt 07 / 07 / 2024
Transaction ID : SA11AI.253747
 Amount of Each Receipt this Period 26.05
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	129.85
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 24 OF 259
	<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Buss, Ashley, , Mr,		Date of Receipt MM / DD / YYYY 07 / 26 / 2024
Mailing Address 544 S 3RD AVE		Transaction ID : SA11AI.253749
City DEER TRAIL	State CO	Zip Code 80105-8137
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer (for Individual) Deer Trail Books, Ltd.	Occupation (for Individual) Bookkeeper	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 639.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Byrd, Charles, Ray, ,		Date of Receipt MM / DD / YYYY 07 / 17 / 2024
Mailing Address 130 Angle Ln		Transaction ID : SA11AI.253755
City Modesto	State CA	Zip Code 95354-3801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) Allied Universal Security Systems	Occupation (for Individual) Security Guard	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 593.28	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Cachafeiro-Gonzalez, Jose, , ,		Date of Receipt MM / DD / YYYY 07 / 16 / 2024
Mailing Address 50 SE 12TH ST APT 131A		Transaction ID : SA11AI.253757
City BOCA RATON	State FL	Zip Code 33432-7380
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.52
Name of Employer (for Individual) Best Efforts Info Requested	Occupation (for Individual) Best Efforts Info Requested	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 375.12	

SUBTOTAL of Receipts This Page (optional).....▶	109.52
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 25 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Cagle, Michael, Anthony, Mr, Jr

Mailing Address **6225 SUDBURY DR**

City Dallas	State TX	Zip Code 75214-2332
----------------	-------------	------------------------

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

Name of Employer (for Individual) Capital One	Occupation (for Individual) Software Engineer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2024

Transaction ID : SA11AI.253758

Amount of Each Receipt this Period
43.26

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Calhoun, Kristin, L, ,

Mailing Address **220959 BELL ST**

City HATLEY	State WI	Zip Code 54440-6000
----------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Sex worker
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2024

Transaction ID : SA11AI.253764

Amount of Each Receipt this Period
84.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Campbell, Thorne, Templeton, Mr,

Mailing Address **2615 A AND M CIR**

City San Angelo	State TX	Zip Code 76904-5824
--------------------	-------------	------------------------

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 ▼
328.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2024

Transaction ID : SA11AI.253774

Amount of Each Receipt this Period
43.26

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	170.52
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 26 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Carney, Mark, , ,

Mailing Address 15100 N Holly Rd

City Holly	State MI	Zip Code 48442-1139
---------------	-------------	------------------------

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

Name of Employer (for Individual) Mark Carney Agency	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2024

Transaction ID : SA11AI.253790

Amount of Each Receipt this Period
30.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Carter, John, , ,

Mailing Address 3306 Sahalee Dr W

City Redmond	State WA	Zip Code 98074-0000
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1287.50

Date of Receipt
MM / DD / YYYY
07 / 31 / 2024

Transaction ID : SA11AI.253797

Amount of Each Receipt this Period
128.75

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Cassarino, David, Samuel, , MD

Mailing Address 1621 Barry Ave Apt 302
302

City Los Angeles	State CA	Zip Code 90025-8714
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2024

Transaction ID : SA11AI.253803

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	200.75
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 27 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Cawthon, James, C, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11202 DALLAS DR
 City GARDEN GROVE State CA Zip Code 92840-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Walt Disney Company Occupation (for Individual) Electrician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.253812
 Amount of Each Receipt this Period 40.00
 Memo Item
 Contribution

B. Cenkus, Mark, A, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6810 CHESSLEY CHASE DR
 City SUGAR LAND State TX Zip Code 77479-5951
 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 ▼ 1050.00

Date of Receipt 07 / 25 / 2024
Transaction ID : SA11AI.253816
 Amount of Each Receipt this Period 150.00
 Memo Item
 Contribution

C. Chadderdon, Andrew, Stephen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30005 MALVERN ST
 City WESTLAND State MI Zip Code 48185-2568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Forvia Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 295.80

Date of Receipt 07 / 26 / 2024
Transaction ID : SA11AI.253817
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	195.15
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 28 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Chai, Amy, F., Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 Blue Hills Rd
 City North Haven State CT Zip Code 06473-1052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Trinity Health of New England Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1717.50

Date of Receipt 07 / 25 / 2024
Transaction ID : SA11AI.253819
 Amount of Each Receipt this Period 150.00
 Memo Item
 Contribution

B. CHAMBERLIN, HOWARD, Allen, Mr., Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42755 STATE HIGHWAY 118
 City FORT DAVIS State TX Zip Code 79734-2526
 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 ▼ 502.00

Date of Receipt 07 / 07 / 2024
Transaction ID : SA11AI.253825
 Amount of Each Receipt this Period 250.00
 Memo Item
 Contribution

C. CHAMBERLIN, HOWARD, Allen, Mr., Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42755 STATE HIGHWAY 118
 City FORT DAVIS State TX Zip Code 79734-2526
 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 ▼ 544.00

Date of Receipt 07 / 30 / 2024
Transaction ID : SA11AI.253824
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	442.00
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 29 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Chick, Daniel, Joseph, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 684 GLENWOOD DR
 City PAINESVILLE State OH Zip Code 44077-2824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Inertial Aerospace Occupation (for Individual) avionics technician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.50

Date of Receipt 07 / 19 / 2024
Transaction ID : SA11AI.253828
 Amount of Each Receipt this Period 51.50
 Memo Item
 Contribution

B. Chick, Daniel, Joseph, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 684 GLENWOOD DR
 City PAINESVILLE State OH Zip Code 44077-2824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Inertial Aerospace Occupation (for Individual) avionics technician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.25

Date of Receipt 07 / 22 / 2024
Transaction ID : SA11AI.253829
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

C. Chidester, Porter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4211 ISOLETTA CT
 City KATY State TX Zip Code 77449-5976
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Port Houston Occupation (for Individual) Electronic technician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 08 / 2024
Transaction ID : SA11AI.253830
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	119.25
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 30 OF 259
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
[X] 11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Christman, Joseph, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 18780 NW ROCK CREEK CIR
City PORTLAND State OR Zip Code 97229-3253
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) UST Global Occupation (for Individual) Computer Programmer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 397.01

Date of Receipt 07 / 30 / 2024
Transaction ID : SA11AI.253836
Amount of Each Receipt this Period 5.21
Memo Item
Contribution

B. Clark, Darryl, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 839 N MATT DR
City PUEBLO WEST State CO Zip Code 81007-1119
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Kemin Industries Occupation (for Individual) Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 375.12

Date of Receipt 07 / 23 / 2024
Transaction ID : SA11AI.253840
Amount of Each Receipt this Period 62.52
Memo Item
Contribution

C. Classen, Matt, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1011 OLD OLIVE WAY APT 305
City CREVE COEUR State MO Zip Code 63141-5962
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Enterprise Fleet Management Occupation (for Individual) Senior Accountant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 302.82

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.253846
Amount of Each Receipt this Period 43.26
Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional) 110.99
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 31 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Claytor, Christopher, John, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8717 MANDEVILLA DR
 City PLANO State TX Zip Code 75024-7292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T-Mobile Occupation (for Individual) IT Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253849
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

B. Coalson, Martin, Hasty, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20588 CHANSON WAY
 City RENO State NV Zip Code 89511-9293
 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 ▼ 350.00

Date of Receipt 07 / 28 / 2024
Transaction ID : SA11AI.253860
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

C. Cole, Charles, , Mr., Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 BILLINGS AVE
 City TROY State NY Zip Code 12180-6225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253866
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 32 OF 259
	<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Cole, H A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22851 S VIA DEL ARROYO
 City QUEEN CREEK State AZ Zip Code 85142-4049
 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 ▼ 273.00

Date of Receipt 07 / 28 / 2024
Transaction ID : SA11AI.253867
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

B. Conard, Timothy, Scott, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9529 SECRETARIAT DR
 City CHARLOTTE State NC Zip Code 28216-1867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City of Charlotte Occupation (for Individual) IT Generalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 376.13

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253880
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

C. Conrad, Nicholas, Nelson, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8321 PIONEER DR
 City ANCHORAGE State AK Zip Code 99504-4714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Queryon Occupation (for Individual) IT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253887
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	121.00
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 33 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Coon, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4312 STREAMSIDE DR
 City SANTA ROSA State CA Zip Code 95409-7153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Coast Guard Occupation (for Individual) IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.55

Date of Receipt 07 / 25 / 2024
Transaction ID : SA11AI.253898
 Amount of Each Receipt this Period 25.00
 Memo Item
 Contribution

B. Cowan, Jonathan, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7355 HIGH CROSS BLVD UNIT 108
 City COLUMBUS State OH Zip Code 43235-1685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Franklin County Prosecutor's Office Occupation (for Individual) Legal intern
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.69

Date of Receipt 07 / 22 / 2024
Transaction ID : SA11AI.253914
 Amount of Each Receipt this Period 21.88
 Memo Item
 Contribution

C. Crain, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10441 CRICKET SOUND CT
 City GRANGER State IN Zip Code 46530-7211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Summit Radiology Occupation (for Individual) Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 390.75

Date of Receipt 07 / 25 / 2024
Transaction ID : SA11AI.253922
 Amount of Each Receipt this Period 130.25
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	177.13
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 34 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Creamer, Richard, Alan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 N MIMOSA AVE
 City MIDDLEBURG State FL Zip Code 32068-4632
 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 ▼ 279.60

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.253927
 Amount of Each Receipt this Period 25.00
 Memo Item
 Contribution

B. Crouch, Zachary, , , Sr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 NORTHRIDGE DR
 City VICKSBURG State MS Zip Code 39180-8394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Adapt Forward Occupation (for Individual) TCCT Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.50

Date of Receipt 07 / 28 / 2024
Transaction ID : SA11AI.253930
 Amount of Each Receipt this Period 26.05
 Memo Item
 Contribution

C. Crawl, J Devin, , Rev,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1805 ROLLING CREEK RD
 City EDMOND State OK Zip Code 73034-6034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mercy Occupation (for Individual) Regional I.T. Supervisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 651.25

Date of Receipt 07 / 21 / 2024
Transaction ID : SA11AI.253932
 Amount of Each Receipt this Period 130.25
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	181.30
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 35 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. CSC Corp

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 Hays St

City Tallahassee	State FL	Zip Code 32301-0000
---------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) N/A
--	------------------------------------

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
 07 / 24 / 2024

Transaction ID : SA11AI.256012

Amount of Each Receipt this Period
250.00

Memo Item
 Legal Fees Refund

B. Cunningham, Warren, J., ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 SOUTH LAKE DR

City SAVANNAH	State GA	Zip Code 31410-1728
------------------	-------------	------------------------

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 ▼
543.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.253942

Amount of Each Receipt this Period
13.00

Memo Item
 Contribution

C. Cutler, Julia, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4470 WESTWOOD DR

City WDM	State IA	Zip Code 50265-6971
-------------	-------------	------------------------

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

Name of Employer (for Individual) Iowa Defenders, PLLC	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1242.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2024

Transaction ID : SA11AI.253945

Amount of Each Receipt this Period
26.05

Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	289.05
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 36 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Dallmann, De, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15707 S RIVER RD
 City Plainfield State IL Zip Code 60544-8119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DOE Occupation (for Individual) Supervisory Physical Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 721.00

Date of Receipt 07 / 10 / 2024
Transaction ID : SA11AI.253952
 Amount of Each Receipt this Period 103.00
 Memo Item
 Contribution

B. Darr, Paul, Joseph, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11902 PURE SILVER
 City SAN ANTONIO State TX Zip Code 78254-6226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DLIELC Occupation (for Individual) IT Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 533.02

Date of Receipt 07 / 21 / 2024
Transaction ID : SA11AI.253958
 Amount of Each Receipt this Period 10.46
 Memo Item
 Contribution

C. Decicco, Daniel, Joseph, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6324 LANTERN VIEW PL
 City APOLLO BEACH State FL Zip Code 33572-1572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAE Occupation (for Individual) Program Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 216.58

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.253976
 Amount of Each Receipt this Period 16.66
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	130.12
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 37 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Decker, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1818 GLENVILLE DR
 City ALLEN State TX Zip Code 75013-3064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vector Marketing Occupation (for Individual) sale professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 433.34

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.253978
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

B. DiBasio, Joseph, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8239 S KELLERMAN CIR
 City AURORA State CO Zip Code 80016-7399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Entrepreneur
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.253996
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

C. DiLella, Daniel, , Mr., Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3843 WEST CHESTER PIKE
 City NEWTOWN SQ State PA Zip Code 19073-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Equus Capital Partners, Ltd. Occupation (for Individual) Real Estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 26 / 2024
Transaction ID : SA11AI.254002
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	271.00
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 38 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Downie, Trevor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6309 REID DR NW
 City GIG HARBOR State WA Zip Code 98335-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Holman Distribution Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 516.76

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254015
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

B. Downs, Michael, Gerard, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 COUNTRYSIDE CT
 City HANOVER State MD Zip Code 21076-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DLA Occupation (for Individual) Logistics Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.13

Date of Receipt 07 / 27 / 2024
Transaction ID : SA11AI.254016
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

C. Drake, David, Fulster, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14530 SAILVIEW CT
 City MIDLOTHIAN State VA Zip Code 23112-5010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA Hospital Richmond Virginia Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254018
 Amount of Each Receipt this Period 30.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	40.15
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 39 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Durham, Steven, Thomas, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 CONGRESSIONAL CT
 City LAS VEGAS State NV Zip Code 89113-1333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Casino Industry
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.38

Date of Receipt 07 / 09 / 2024
Transaction ID : SA11AI.254028
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

B. Earnheart, Bruce, W, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 GRAFTON AVE
 City DAYTON State OH Zip Code 45406-5428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hiighgate Hospitality Occupation (for Individual) night auditor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 966.90

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254040
 Amount of Each Receipt this Period 339.90
 Memo Item
 Contribution

C. Ecker, Stephen, , Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 LAKE SHORE DR
 City IOLA State WI Zip Code 54945-9487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Imprivata Occupation (for Individual) Senior Software Engineer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 792.18

Date of Receipt 07 / 09 / 2024
Transaction ID : SA11AI.254043
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	391.40
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 40 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Eddlem, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 Silverwood Dr
 City Taunton State MA Zip Code 02780-4389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Plasterer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.88

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.254046
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

B. Elliott, Ken, Rollin, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 852 WHITCOMB WOODS DR
 City Troy State MO Zip Code 63379-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Flooring Contractor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 721.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254059
 Amount of Each Receipt this Period 103.00
 Memo Item
 Contribution

C. Enterline, Randall, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Po Box 276
 City Neshanic State NJ Zip Code 08844-3316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vernoia, Enterline & Brewer, CPA, LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 17 / 2024
Transaction ID : SA11AI.254068
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	151.41
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 41 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Espy, Charles, Clifford, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 820
 City FAIRFIELD State IA Zip Code 52556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 18 / 2024
Transaction ID : SA11AI.254075
 Amount of Each Receipt this Period 500.00
 Memo Item
 Contribution

B. Fahy, Gregory, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 478
 City NORCO State CA Zip Code 92860-4780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 21st Century Medicine Occupation (for Individual) Cryobiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.50

Date of Receipt 07 / 22 / 2024
Transaction ID : SA11AI.254083
 Amount of Each Receipt this Period 16.00
 Memo Item
 Contribution

C. Farris, Taylor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 23RD ST NW
 City AUBURN State WA Zip Code 98001-3303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) United States Coast Guard Occupation (for Individual) Electrician's Mate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.254098
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	566.00
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 42 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Feldman, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 807 CHESTER ROAD
 City WINSTON-SALEM State NC Zip Code 27104-1707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Best Efforts Info Requested Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2024
Transaction ID : SA11AI.254107
 Amount of Each Receipt this Period
 260.50
 Memo Item
 Contribution

B. Fernandes, Fred, Dan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 STRATFORD WAY
 City LA VERNE State CA Zip Code 91750-5143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Raytheon/ Retired Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2024
Transaction ID : SA11AI.254111
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Contribution

C. Fitzgerald, Collin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2813 BIDDLE AVE
 City WYANDOTTE State MI Zip Code 48192-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BASF QA tech
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1877.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2024
Transaction ID : SA11AI.254129
 Amount of Each Receipt this Period
 750.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1510.50
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 43 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Folsom, Mark, Raleigh, ,			Date of Receipt
Mailing Address 73 HIGHLAND VIEW DR			<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2024"/>
City SOMERS	State CT	Zip Code 06071-1557	Transaction ID : SA11AI.254139
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="42.00"/>
Name of Employer (for Individual) N/a		Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="294.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fox, Christopher, H., ,			Date of Receipt
Mailing Address 51 ATLANTA AVE			<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2024"/>
City PISCATAWAY	State NJ	Zip Code 08854-2139	Transaction ID : SA11AI.254152
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="26.05"/>
Name of Employer (for Individual) Piscataway High School		Occupation (for Individual) Student	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="286.55"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Fox, Drake, , Mr.,			Date of Receipt
Mailing Address 7602 Owl Roost Ct			<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2024"/>
City Wilmington	State NC	Zip Code 28411-9176	Transaction ID : SA11AI.254153
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="128.75"/>
Name of Employer (for Individual) Spirit Airlines		Occupation (for Individual) Pilot	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="1312.67"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="196.80"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 OF 259
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Freeman, Russell, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 Westmont Rd
 City Syracuse State NY Zip Code 13219-2440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Saab Sensis Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 24 / 2024
Transaction ID : SA11AI.254163
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

B. Furey, Kyle, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4760 S WADSWORTH BLVD
 City DENVER State CO Zip Code 80123-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nederveld Occupation (for Individual) Insurance Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.75

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254171
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

C. Gamache, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6414 Aster Trl
 City Excelsior State MN Zip Code 55331-8818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wells Fargo Bank, NA Occupation (for Individual) Mortgage Document Analyst
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 407.24

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254184
 Amount of Each Receipt this Period 13.39
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	61.65
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 45 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Gamble, Shelly, , II
 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)
 Hk Xfy Find Unique Timepiece Styles at Amazi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1030.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2024
Transaction ID : SA11AI.254186
 Amount of Each Receipt this Period
 1030.00
 Memo Item
 Contribution

B. Gann, Randy, Lee, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6335 S 72ND EAST AVE
 City State Zip Code
 TULSA OK 74133-1122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Retired Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2024
Transaction ID : SA11AI.254188
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Contribution

C. Gann, Randy, Lee, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6335 S 72ND EAST AVE
 City State Zip Code
 TULSA OK 74133-1122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Retired Retired
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 333.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2024
Transaction ID : SA11AI.254189
 Amount of Each Receipt this Period
 103.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1183.00
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 46 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Garcia, Roman, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6848 E BROWNSTONE PL
 City TUCSON State AZ Zip Code 85750-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHS Occupation (for Individual) Healthcare IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8336.10

Date of Receipt 07 / 25 / 2024
Transaction ID : SA11AI.254195
 Amount of Each Receipt this Period 100.00
 Memo Item
 Contribution

B. Gates, Emily, H., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 W Shore Trce
 City Newnan State GA Zip Code 30263-7465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Best Efforts Info Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 07 / 2024
Transaction ID : SA11AI.254207
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

C. Gay, David, , Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 ROSEWOOD ST # 1L
 City SYRACUSE State NY Zip Code 13203-1566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Liberty Memes Foundation Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 25 / 2024
Transaction ID : SA11AI.254212
 Amount of Each Receipt this Period 250.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	475.00
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 47 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Genevich, Joseph, Anthony, Mr,

Mailing Address **855 PLEASANT ST**

City BRIDGEWATER	State MA	Zip Code 02324-2351
----------------------------	--------------------	-------------------------------

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 ▼
201.15

Date of Receipt
07 / 16 / 2024

Transaction ID : SA11AI.254220

Amount of Each Receipt this Period
25.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Gesell, Christopher, H., Mr.,

Mailing Address **12724 Chapel Chase Dr**

City Clarksville	State MD	Zip Code 21029-1166
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) ESentire	Occupation (for Individual) Chief Portfolio Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt
07 / 01 / 2024

Transaction ID : SA11AI.254227

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GHERMANN, Ernst, Friedrich, Mr,

Mailing Address **333 Willow StApt 116**

City Alameda	State CA	Zip Code 94501-6144
------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
07 / 30 / 2024

Transaction ID : SA11AI.254229

Amount of Each Receipt this Period
50.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	117.00
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 48 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Gieseke, Collin, Robert, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58331 FORT RD
 City NEW ULM State MN Zip Code 56073-4306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) My Boss Occupation (for Individual) Chef
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 30 / 2024
Transaction ID : SA11AI.254231
 Amount of Each Receipt this Period 250.00
 Memo Item
 Contribution

B. Gitzendanner, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5565 E CUSTER PL
 City DENVER State CO Zip Code 80246-1440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Boulder Imaging, Inc. Occupation (for Individual) Sr Business Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1113.90

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254236
 Amount of Each Receipt this Period 86.52
 Memo Item
 Contribution

C. Glasgow, Darren, Norman, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 GEBIG RD
 City NOTTINGHAM State NH Zip Code 03290-6108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Chef
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 07 / 21 / 2024
Transaction ID : SA11AI.254238
 Amount of Each Receipt this Period 60.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	396.52
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 49 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Glass, W Bruce, , Mr.,

Mailing Address **84 BAKEWELL CT**

City CRANSTON	State RI	Zip Code 02921-2411
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Senior Care Management
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2024

Transaction ID : SA11AI.254239

Amount of Each Receipt this Period

51.50

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Gooch, Harold, J, ,

Mailing Address **2816 SUNSET DR**

City BETHLEHEM	State PA	Zip Code 18020-2816
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Sacred Heart Hospital	Occupation (for Individual) Pharmacist
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2024

Transaction ID : SA11AI.254255

Amount of Each Receipt this Period

30.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Gouge, Nicholas, , ,

Mailing Address **213 RESERVOIR RD APT C**

City BURNSVILLE	State NC	Zip Code 28714-3399
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Altec Industries	Occupation (for Individual) Welder
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **209.35**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2024

Transaction ID : SA11AI.254271

Amount of Each Receipt this Period

25.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	106.50
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 50 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Gray, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 Middle St
 City Lexington State MA Zip Code 02421-7723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wolters Kluwer Financial Service Occupation (for Individual) Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 05 / 2024
Transaction ID : SA11AI.254280
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

B. Gray, James, Polin, Juidge, Ret
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2531 CRESTVIEW DR
 City NEWPORT BEACH State CA Zip Code 92663-5624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADR Services, Inc. Occupation (for Individual) Private Judge
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254281
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

C. Gray, James, Polin, Juidge, Ret
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2531 CRESTVIEW DR
 City NEWPORT BEACH State CA Zip Code 92663-5624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADR Services, Inc. Occupation (for Individual) Private Judge
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 561.50

Date of Receipt 07 / 13 / 2024
Transaction ID : SA11AI.254282
 Amount of Each Receipt this Period 261.50
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	353.50
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 51 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. GRIFFIN, FRANKLIN, Ford, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 RENEL DR
 City BREAUX BRIDGE State LA Zip Code 70517-6470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/a Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 258.30

Date of Receipt 07 / 04 / 2024
Transaction ID : SA11AI.254290
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

B. Grill, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2702 WILLOW BEND RD
 City CHAMPAIGN State IL Zip Code 61822-7592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regency Management Service Occupation (for Individual) business exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254296
 Amount of Each Receipt this Period 100.00
 Memo Item
 Contribution

C. Guetter, Peter, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 23
 City WABASSO State MN Zip Code 56293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Radiology technician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254308
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	169.01
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 52 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Gunther, Jonathan, H, ,		Date of Receipt MM / DD / YYYY 07 / 28 / 2024
Mailing Address 636 STEWART AVE		Transaction ID : SA11AI.254312
City BETHPAGE	State NY	Zip Code 11714-2704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.05
Name of Employer (for Individual) Fedex	Occupation (for Individual) Ops coordinator	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.43	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Haggerty, James, P., ,		Date of Receipt MM / DD / YYYY 07 / 12 / 2024
Mailing Address 1128 VIA GRANDE		Transaction ID : SA11AI.254324
City CATHEDRAL CTY	State CA	Zip Code 92234-4300
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Real Estate	Occupation (for Individual) Agent	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hagopian, Todd, Christopher, ,		Date of Receipt MM / DD / YYYY 07 / 08 / 2024
Mailing Address 11290 S 72ND EAST CT		Transaction ID : SA11AI.254326
City BIXBY	State OK	Zip Code 74008-2344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Cash Flow Acquisitions, Inc.	Occupation (for Individual) President	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 611.25	

SUBTOTAL of Receipts This Page (optional).....▶	1076.05
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 53 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Haltom, Robert, Houston, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5324 CAROLINE DR
 City Bryan State TX Zip Code 77807-7802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested
 Occupation (for Individual) Best Efforts Info Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2024
Transaction ID : SA11AI.254336
 Amount of Each Receipt this Period
 130.25
 Memo Item
 Contribution

B. Hamilton, Daniel, , Dr., DC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1828 KNOLLMONT DR
 City FLORENCE State KY Zip Code 41042-4334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Elite Physical Medicine
 Occupation (for Individual) Chiropractor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024
Transaction ID : SA11AI.254337
 Amount of Each Receipt this Period
 42.00
 Memo Item
 Contribution

C. Hansen, Howard, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5303 E FOUNTAIN ST
 City Mesa State AZ Zip Code 85205-5414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Heartwood Tree Care
 Occupation (for Individual) Self Employed
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024
Transaction ID : SA11AI.254350
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	222.25
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 54 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Harper, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5637 E 2ND ST
 City LONG BEACH State CA Zip Code 90803-3951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Best Efforts Info Requested Best Efforts Info Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2024
Transaction ID : SA11AI.254358
 Amount of Each Receipt this Period
 515.00
 Memo Item
 Contribution

B. Haseloff, Robert, Henry, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4320 LAURIE MICHELLE RD
 City SAN ANTONIO State TX Zip Code 78261-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 USAA Contract negotiator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2297.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024
Transaction ID : SA11AI.254371
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Contribution

C. Haubein, Jennifer, Margaret, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 NEARPOINT LN
 City TOMBALL State TX Zip Code 77377-2592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BP Communications
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 942.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2024
Transaction ID : SA11AI.254378
 Amount of Each Receipt this Period
 25.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	790.00
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 55 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Hayes, Gary, Allen, Mr.,

Mailing Address 6140 HADDINGTON DR

City Memphis	State TN	Zip Code 38119-7549
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.254388

Amount of Each Receipt this Period
30.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Healy, William, C, Mr.,

Mailing Address 10002 AURORA AVE N # 5551

City SEATTLE	State WA	Zip Code 98133-9347
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
927.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2024

Transaction ID : SA11AI.254391

Amount of Each Receipt this Period
125.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Heise, Michael, , ,

Mailing Address 923 Spruce Street

City Honey Brook	State PA	Zip Code 19344-0000
---------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) N/A
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2024

Transaction ID : SA11AI.254397

Amount of Each Receipt this Period
1200.00

Memo Item
Cost Reimbursement for Convention

SUBTOTAL of Receipts This Page (optional).....	1355.00
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 56 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Hendrix, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6019 Taylorsville Rd
 City Dayton State OH Zip Code 45424-2949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northrop Grumman Occupation (for Individual) software engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.25

Date of Receipt 07 / 01 / 2024
 Transaction ID : SA11AI.254403
 Amount of Each Receipt this Period 25.00
 Memo Item
 Contribution

B. Herchenreder, Richard, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SHERMAN DR
 City S DEERFIELD State MA Zip Code 01373-9732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M&M Consulting LLC Occupation (for Individual) auditor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.48

Date of Receipt 07 / 01 / 2024
 Transaction ID : SA11AI.254405
 Amount of Each Receipt this Period 13.39
 Memo Item
 Contribution

C. Herrin, Phillip, Michael, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1379 Calgary Way
 City Bowling Green State KY Zip Code 42101-6579
 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 ▼ 444.00

Date of Receipt 07 / 01 / 2024
 Transaction ID : SA11AI.254408
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	80.39
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 57 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Higa, Glenn, Yukio, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9350 E MOUNTAIN VIEW RD
 City Prescott Valley State AZ Zip Code 86315-4220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Federal Aviation Administration Occupation (for Individual) Air Traffic Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254415
 Amount of Each Receipt this Period 30.00
 Memo Item
 Contribution

B. Himes, Jason, Francis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 N FORK TRL
 City GEORGETOWN State TX Zip Code 78633-2324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jacobs Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 04 / 2024
Transaction ID : SA11AI.254423
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

C. Hoiles, Douglas, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10047 E ACAMPO RD
 City ACAMPO State CA Zip Code 95220-9480
 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 ▼ 203.00

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.254435
 Amount of Each Receipt this Period 100.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	255.00
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 58 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Hoiles, Pamela, J, Mrs,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 DAVENPORT AVE APT 1
 City GREENWICH State CT Zip Code 06830-7176
 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 ▼ 360.50

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254436
 Amount of Each Receipt this Period 51.50
 Memo Item
 Contribution

B. Holzberger, Robert, Alan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 Oakwood Ave
 City Stevens Point State WI Zip Code 54482-9164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCSA Occupation (for Individual) Investigator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 774.00

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.254440
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

C. Hopkins, William, Robert, Mr, Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2609 W SOUTHERN AVE LOT 158
 City TEMPE State AZ Zip Code 85282-4219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alaska Airlines Occupation (for Individual) Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 07 / 15 / 2024
Transaction ID : SA11AI.254446
 Amount of Each Receipt this Period 51.50
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	124.00
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 59 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Hunzeker, Robert, Lyle, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 TOWERS PARK LN
 City SAN ANTONIO State TX Zip Code 78209-6438
 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 ▼ 875.00

Date of Receipt 07 / 26 / 2024
Transaction ID : SA11AI.254468
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

B. Hyman, Will, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 GOULD AVE
 City CLARKSBURG State WV Zip Code 26301-1546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Reep Graphics Occupation (for Individual) Art Dude
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.54

Date of Receipt 07 / 30 / 2024
Transaction ID : SA11AI.254477
 Amount of Each Receipt this Period 21.63
 Memo Item
 Contribution

C. Jackson, Lee, S., Dr., PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 DORAL DR
 City SHALIMAR State FL Zip Code 32579-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254488
 Amount of Each Receipt this Period 52.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	198.63
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 60 OF 259
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Jewett, Scott, , Mr,

Mailing Address **761 SW 18TH ST**

City BOCA RATON	State FL	Zip Code 33486-7030
---------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
631.25

Date of Receipt
07 / 22 / 2024

Transaction ID : SA11AI.254514

Amount of Each Receipt this Period
23.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Johanson, Will, , ,

Mailing Address **3435 S CONSTITUTION WAY**

City BOISE	State ID	Zip Code 83706-5617
----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Boise State University	Occupation (for Individual) Student
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
639.22

Date of Receipt
07 / 29 / 2024

Transaction ID : SA11AI.254516

Amount of Each Receipt this Period
13.39

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Johnson, Byron, James, ,

Mailing Address **584 ASPEN CIR**

City PRESTON	State ID	Zip Code 83263-1644
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Byron Johnson	Occupation (for Individual) Software
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
286.45

Date of Receipt
07 / 13 / 2024

Transaction ID : SA11AI.254517

Amount of Each Receipt this Period
50.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	86.39
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 61 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Johnson, Matthew, , ,		Date of Receipt MM / DD / YYYY 07 / 01 / 2024 Transaction ID : SA11AI.254530
Mailing Address 908 NEW BEDFORD DR		Amount of Each Receipt this Period 125.00
City DELAND	State FL	Zip Code 32724-2952
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) On Target Digital, LLC	Occupation (for Individual) Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Johnson, Michael, , ,		Date of Receipt MM / DD / YYYY 07 / 01 / 2024 Transaction ID : SA11AI.254531
Mailing Address 74800 Judges Ct		Amount of Each Receipt this Period 42.00
City Bruce Twp	State MI	Zip Code 48065-3130
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Dirksen Screw Products Co.	Occupation (for Individual) Machinist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Johnson, Paul, Marshall, ,		Date of Receipt MM / DD / YYYY 07 / 15 / 2024 Transaction ID : SA11AI.254534
Mailing Address 1141 ELKINS DR		Amount of Each Receipt this Period 104.60
City AUBURN	State AL	Zip Code 36830-6144
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) N.A.	Occupation (for Individual) retired college professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 209.20	

SUBTOTAL of Receipts This Page (optional).....	271.60
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 62 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Jones, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 LORENE DR
 City Pasadena State MD Zip Code 21122-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) artist, proofreader, game designer, ph
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.12

Date of Receipt 07 / 18 / 2024
Transaction ID : SA11AI.254544
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

B. Jones, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 LORENE DR
 City Pasadena State MD Zip Code 21122-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) artist, proofreader, game designer, ph
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.87

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254543
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

C. Kahler, Heather, A., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8136 Rolling Hills Dr
 City Bozeman State MT Zip Code 59715-9346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFL.Com Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 254.60

Date of Receipt 07 / 26 / 2024
Transaction ID : SA11AI.254559
 Amount of Each Receipt this Period 150.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	180.75
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 63 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kalafut, Gerald, , Mr.,		Date of Receipt
Mailing Address 14405 N 43RD WAY		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2024"/>
City PHOENIX	State AZ	Zip Code 85032-5464
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.254561
Name of Employer (for Individual) AerialSphere		Occupation (for Individual) Software Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="302.82"/>	Amount of Each Receipt this Period <input type="text" value="43.26"/>
		<input type="checkbox"/> Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Karpinski, Leonard, John, ,		Date of Receipt
Mailing Address 74 YORKTOWN RD		<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2024"/>
City MOUNTAIN TOP	State PA	Zip Code 18707-2236
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.254569
Name of Employer (for Individual) NANA Worley, Anchorage		Occupation (for Individual) principal designer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="459.72"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>
		<input type="checkbox"/> Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Karpinski, Leonard, John, ,		Date of Receipt
Mailing Address 74 YORKTOWN RD		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2024"/>
City MOUNTAIN TOP	State PA	Zip Code 18707-2236
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.254568
Name of Employer (for Individual) NANA Worley, Anchorage		Occupation (for Individual) principal designer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="473.11"/>	Amount of Each Receipt this Period <input type="text" value="13.39"/>
		<input type="checkbox"/> Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="66.65"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 64 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kelly, Brian, Francis, ,

Mailing Address 504 GREELEY AVE

City WEBSTER GRVS	State MO	Zip Code 63119-1830
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RGA Reinsurance	Occupation (for Individual) Actuary
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.254584

Amount of Each Receipt this Period
13.00

Memo Item
Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kelly, Brian, Francis, ,

Mailing Address 504 GREELEY AVE

City WEBSTER GRVS	State MO	Zip Code 63119-1830
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RGA Reinsurance	Occupation (for Individual) Actuary
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2024

Transaction ID : SA11AI.254583

Amount of Each Receipt this Period
25.75

Memo Item
Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kerby, Patrick, , ,

Mailing Address 50 EMERY ST

City PAHRUMP	State NV	Zip Code 89048-4668
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Beyond L.A. Productions	Occupation (for Individual) Cameraman
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1942.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2024

Transaction ID : SA11AI.254594

Amount of Each Receipt this Period
62.52

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	101.27
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 65 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kiernan, Brian, G, Mr.,		Date of Receipt MM / DD / YYYY 07 / 01 / 2024
Mailing Address 435 CARPENTERS COVE LN		Transaction ID : SA11AI.254602
City DOWNTOWN	State PA	Zip Code 19335-4541
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.50
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kinsella, Norman, , ,		Date of Receipt MM / DD / YYYY 07 / 05 / 2024
Mailing Address 3101 AVALON PL		Transaction ID : SA11AI.254608
City HOUSTON	State TX	Zip Code 77019-5905
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Self	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Kitson, Sally, Ann, Ms,		Date of Receipt MM / DD / YYYY 07 / 02 / 2024
Mailing Address 2455 LAS VARAS CANYON RD		Transaction ID : SA11AI.254614
City GOLETA	State CA	Zip Code 93117-8722
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 104.60
Name of Employer (for Individual) Retired	Occupation (for Individual) Bookkeeping	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 207.60	

SUBTOTAL of Receipts This Page (optional).....▶	1156.10
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 66 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Kleiner, John, Murray Allen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 GREENFIELD DR
 City MORAGA State CA Zip Code 94556-1333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) visual communicator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 07 / 03 / 2024
Transaction ID : SA11AI.254619
 Amount of Each Receipt this Period 85.00
 Memo Item
 Contribution

B. Kless, Edward, Joseph, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1581 BRADFORD TRACE DR
 City ALLEN State TX Zip Code 75002-9600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sage Occupation (for Individual) Meta Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254621
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Konjarevich, Richard, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6095 Trophy Ave
 City Howell State MI Zip Code 48855-8275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GM Occupation (for Individual) Worker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254639
 Amount of Each Receipt this Period 35.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	162.00
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 67 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Kosiba, Edward, Matthew, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 817 S Glover St
 City Baltimore State MD Zip Code 21224-3730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASRC Federal Occupation (for Individual) ISSO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.50

Date of Receipt 07 / 21 / 2024
Transaction ID : SA11AI.254642
 Amount of Each Receipt this Period 257.50
 Memo Item
 Contribution

B. Kronmiller, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4614 TRENTON RD
 City CHAPEL HILL State NC Zip Code 27517-8928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Best Efforts Info Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.20

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.254658
 Amount of Each Receipt this Period 209.20
 Memo Item
 Contribution

C. LaChey, Andrew, G., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1485 CHELSEA RD
 City TROY State OH Zip Code 45373-1207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Norwood Medical Occupation (for Individual) Machine Operator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1239.13

Date of Receipt 07 / 29 / 2024
Transaction ID : SA11AI.254678
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	487.70
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 68 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LaClair, James, , ,		Date of Receipt MM / DD / YYYY 07 / 01 / 2024 Transaction ID : SA11AI.254680
Mailing Address 10180 FENCEPOST LN		Amount of Each Receipt this Period 84.00
City Traverse City	State MI	Zip Code 49685-7470
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) NNF	Occupation (for Individual) Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 738.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lamb, George, Peter, Mr., III		Date of Receipt MM / DD / YYYY 07 / 01 / 2024 Transaction ID : SA11AI.254689
Mailing Address 16 MARTHA'S LN		Amount of Each Receipt this Period 100.00
City SANTA ROSA BEACH	State FL	Zip Code 32459-4172
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Applied Construction Technology	Occupation (for Individual) Commerical Construction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LAPOINTE, Jeffrey, Raymond, Mr,		Date of Receipt MM / DD / YYYY 07 / 04 / 2024 Transaction ID : SA11AI.254705
Mailing Address 3067 E SKYLINE VIEW DR		Amount of Each Receipt this Period 100.00
City SAFFORD	State AZ	Zip Code 85546-7517
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 230.34	

SUBTOTAL of Receipts This Page (optional).....	284.00
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 69 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. LAPOINTE, Jeffrey, Raymond, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3067 E SKYLINE VIEW DR

City SAFFORD	State AZ	Zip Code 85546-7517
-----------------	-------------	------------------------

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 ▼
243.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2024

Transaction ID : SA11AI.254704

Amount of Each Receipt this Period
13.39

Memo Item
Contribution

B. Larkin, Christopher, Francis, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 348 N LAKE RD

City STEVENSVILLE	State MD	Zip Code 21666-3444
----------------------	-------------	------------------------

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

Name of Employer (for Individual) United States Department of Defense	Occupation (for Individual) Soldier
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.254709

Amount of Each Receipt this Period
62.52

Memo Item
Contribution

C. Laube, Keith, ALLEN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61670 LYNNELLEN WAY

City Montrose	State CO	Zip Code 81403-4831
------------------	-------------	------------------------

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

Name of Employer (for Individual) Montrose County, Colorado	Occupation (for Individual) civil engineer
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.254710

Amount of Each Receipt this Period
50.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	125.91
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 70 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Leatherbury, Jennifer, Diane, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 ARCHER RD
 City NEWPORT NEWS State VA Zip Code 23606-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Coastal Medical and Psychiatric Servc Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3330.83

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254725
 Amount of Each Receipt this Period 75.00
 Memo Item
 Contribution

B. Lebovitz, George, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1649 PGA BLVD
 City MELBOURNE State FL Zip Code 32935-4456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.01

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254730
 Amount of Each Receipt this Period 21.63
 Memo Item
 Contribution

C. Lecureaux, Andrew, Philip, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23440 HARDING AVE
 City Hazel Park State MI Zip Code 48030-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Appliance Installation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.30

Date of Receipt 07 / 12 / 2024
Transaction ID : SA11AI.254732
 Amount of Each Receipt this Period 30.90
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	127.53
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 71 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Lemberg, Thomas, Matthew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 FISCHER SPUR RD
 City NEWNAN State GA Zip Code 30265-1520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dan Lemberg Architect Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254743
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

B. Lempke, Robert, Everett, Dr, Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4732 TAFT RD
 City West Lafayette State IN Zip Code 47906-5637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lafayette Anesthesiologist, LL Occupation (for Individual) Anesthesiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254744
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

C. Lenaerts, Marc, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9625 Swan Lake Dr
 City Granite Bay State CA Zip Code 95746-6607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Univ of California, Davis Occupation (for Individual) Neurologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.50

Date of Receipt 07 / 14 / 2024
Transaction ID : SA11AI.254745
 Amount of Each Receipt this Period 51.50
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	143.50
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 72 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LePore, Amy, Nicole, ,		Date of Receipt MM / DD / YYYY 07 / 01 / 2024 Transaction ID : SA11AI.254751
Mailing Address 299 N Bayberry Pkwy		Amount of Each Receipt this Period 5.00
City Middletown	State DE	Zip Code 19709-9838
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Anthem Planning	Occupation (for Individual) Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1766.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Leviten, Edward, I., Mr.,		Date of Receipt MM / DD / YYYY 07 / 31 / 2024 Transaction ID : SA11AI.254759
Mailing Address 704 Equestrian Way		Amount of Each Receipt this Period 30.00
City Westbury	State NY	Zip Code 11590-6679
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lewis, Glen, Allen, Mr.,		Date of Receipt MM / DD / YYYY 07 / 13 / 2024 Transaction ID : SA11AI.254760
Mailing Address 2245 CLUB MOSS CIR		Amount of Each Receipt this Period 156.30
City BILOXI	State MS	Zip Code 39532-3325
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Valkyrie	Occupation (for Individual) Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1643.18	

SUBTOTAL of Receipts This Page (optional).....▶	191.30
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 73 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lewis, John, Franklin, ,

Mailing Address 4540 WILKERSON PL SE

City SMYRNA	State GA	Zip Code 30082-4756
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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 ▼
267.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 13 / 2024

Transaction ID : SA11AI.254762

Amount of Each Receipt this Period
13.00

Memo Item
Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lewis, John, Franklin, ,

Mailing Address 4540 WILKERSON PL SE

City SMYRNA	State GA	Zip Code 30082-4756
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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 ▼
277.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2024

Transaction ID : SA11AI.254763

Amount of Each Receipt this Period
10.30

Memo Item
Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lewis, Tabitha, , ,

Mailing Address 2245 CLUB MOSS CIR

City BILOXI	State MS	Zip Code 39532-3325
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Best Efforts Info Requested	Occupation (for Individual) Licensed health and life insurance age
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6695.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2024

Transaction ID : SA11AI.254765

Amount of Each Receipt this Period
6252.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	6275.30
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 74 OF 259
	<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Lewis, Tabitha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2245 CLUB MOSS CIR
 City BILOXI State MS Zip Code 39532-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Best Efforts Info Requested Licensed health and life insurance age
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6757.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2024
Transaction ID : SA11AI.254766
 Amount of Each Receipt this Period
 62.52
 Memo Item
 Contribution

B. Lewis, Tim, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CLOVERLEAF CT
 City FREDERICKSBRG State VA Zip Code 22406-7269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Retired Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024
Transaction ID : SA11AI.254767
 Amount of Each Receipt this Period
 26.05
 Memo Item
 Contribution

C. Lewis, Tim, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CLOVERLEAF CT
 City FREDERICKSBRG State VA Zip Code 22406-7269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Retired Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 755.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2024
Transaction ID : SA11AI.254768
 Amount of Each Receipt this Period
 125.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	213.57
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 75 OF 259
	<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Libkind, Ark, Isaac, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8700 FRONTENAC ST
 City Philadelphia State PA Zip Code 19152-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prime Home Care, Inc. Occupation (for Individual) Board Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254770
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

B. Lind, John, Gilbert, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4160 Kirtland Rd
 City Willoughby State OH Zip Code 44094-7924
 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 ▼ 290.00

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254776
 Amount of Each Receipt this Period 20.00
 Memo Item
 Contribution

C. Llambi, Leandro, , Dr., V
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 Hollywood Ave
 City Cincinnati State OH Zip Code 45224-1530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) St Elizabeth Physicians Occupation (for Individual) Pharmacist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 266.03

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254788
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	150.15
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 76 OF 259
	<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Lofft, Joseph, Stephen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 AVENIDA ABETOS
 City SAN JOSE State CA Zip Code 95123-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Apple inc Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254793
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

B. Lofft, Joseph, Stephen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 AVENIDA ABETOS
 City SAN JOSE State CA Zip Code 95123-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Apple inc Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 07 / 10 / 2024
Transaction ID : SA11AI.254794
 Amount of Each Receipt this Period 22.00
 Memo Item
 Contribution

C. Loflin, Wayne, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2421 GA HIGHWAY 313
 City SYLVESTER State GA Zip Code 31791-7434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRB Occupation (for Individual) Construction Superintendent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 18 / 2024
Transaction ID : SA11AI.254795
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	168.00
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 77 OF 259
	<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Long, Hunter, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 Oyster Rock Ln
 City Sneads Ferry State NC Zip Code 28460-6896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DoD Occupation (for Individual) Marine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254798
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

B. Loomis, Richard, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 AMES RD
 City HAMPDEN State MA Zip Code 01036-9110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Loomis and Loomis, P.C. Occupation (for Individual) Structural Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.25

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254799
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

C. Luria, Jacob, David, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15710 W 3RD PL APT 1
 City GOLDEN State CO Zip Code 80401-5572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Broadspire Occupation (for Individual) Her butt fucker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.39

Date of Receipt 07 / 05 / 2024
Transaction ID : SA11AI.254814
 Amount of Each Receipt this Period 26.05
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	101.80
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 78 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Lynch, Nicholas, , ,

Mailing Address **PO BOX 1172**

City FORESTHILL	State CA	Zip Code 95631-1172
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Best Efforts Info Requested	Occupation (for Individual) Best Efforts Info Requested
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **729.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2024

Transaction ID : SA11AI.254820

Amount of Each Receipt this Period
104.20

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Maddrey, Roland, Waudell, Mr, Jr

Mailing Address **732 N MAIN ST**

City MOORESVILLE	State NC	Zip Code 28115-2314
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Clerical Contractor
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2024

Transaction ID : SA11AI.254826

Amount of Each Receipt this Period
50.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Marshall, Glen, Edward, Mr.,

Mailing Address **949 COLUMBUS DR**

City CAPITOLA	State CA	Zip Code 95010-2309
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) American Airlines	Occupation (for Individual) Pilot
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **294.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2024

Transaction ID : SA11AI.254855

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	196.20
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 79 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Martinez, Andrew, , ,

Mailing Address 16 SENECA LN

City Hamilton Township	State NJ	Zip Code 08690-1620
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) A.J.M. HVAC	Occupation (for Individual) Owner/Operator HVAC company
--	--

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
 07 / 07 / 2024

Transaction ID : SA11AI.254869

Amount of Each Receipt this Period
250.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Marting, Stephen, Paul, Mr,

Mailing Address 1232 SUNSET CT

City HERNDON	State VA	Zip Code 20170-4121
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Progeny Systems	Occupation (for Individual) Engineer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2024

Transaction ID : SA11AI.254870

Amount of Each Receipt this Period
30.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Mathers, Thomas, P., Mr.,

Mailing Address 5626 Ruantan Street

City Berwyn Heights	State MD	Zip Code 20740-4312
------------------------	-------------	------------------------

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

Name of Employer (for Individual) NCBFAA Inc.	Occupation (for Individual) Writer
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
432.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.254881

Amount of Each Receipt this Period
61.80

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	341.80
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 80 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Mathis, Ethan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6530 DAVIDSON ST
 City COLUMBIA State SC Zip Code 29209-1752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southern Industries Home Improvements Occupation (for Individual) Market Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.25

Date of Receipt 07 / 22 / 2024
Transaction ID : SA11AI.254883
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

B. Maysee, Vincent, Mark, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 CAPITOL AVE APT 5
 City Sacramento State CA Zip Code 95816-5739
 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 ▼ 350.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254890
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

C. McArdle, Angela, Elise, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7200 THANNAS WAY
 City AUSTIN State TX Zip Code 78744-5020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Lp slave
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2151.76

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254892
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 81 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. McCollum, Liam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 DALE LN
 City LAUREL State MT Zip Code 59044-9200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.88

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254896
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

B. McCord, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 Monroe Manor Rd
 City Stevensville State MD Zip Code 21666-2218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EShore Sports Occupation (for Individual) Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.18

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.254897
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

C. McFee, Victoria, L, Mrs,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10429 PERLA BELLO CT
 City LAS VEGAS State NV Zip Code 89135-2563
 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 ▼ 350.00

Date of Receipt 07 / 07 / 2024
Transaction ID : SA11AI.254909
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	60.15
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 82 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. McGlothlin, Travis, , ,		Date of Receipt MM / DD / YYYY 07 / 09 / 2024 Transaction ID : SA11AI.254915
Mailing Address 7662 PEACEFUL TRELIS DR		Amount of Each Receipt this Period 25.00
City LAS VEGAS	State NV	Zip Code 89179-2028
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Point Distribution Inc.	Occupation (for Individual) President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.38	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McGrath, Clinton, N., Mr.,		Date of Receipt MM / DD / YYYY 07 / 02 / 2024 Transaction ID : SA11AI.254916
Mailing Address 2603 BAY DR		Amount of Each Receipt this Period 13.00
City POMPANO BEACH	State FL	Zip Code 33062-2920
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Self	Occupation (for Individual) CPA-ATTY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. McLaughlin, James, Christopher, ,		Date of Receipt MM / DD / YYYY 07 / 01 / 2024 Transaction ID : SA11AI.254928
Mailing Address 11919 MAIN STREET		Amount of Each Receipt this Period 50.00
City LIBERTYTOWN	State MD	Zip Code 21762-0121
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) McLaughlin BioSolutions	Occupation (for Individual) Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	88.00
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 83 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. McNally, Patrick, Michael, ,		Date of Receipt MM / DD / YYYY 07 / 22 / 2024
Mailing Address 1323 WILLIAM ST		Transaction ID : SA11AI.254933
City OMAHA	State NE	Zip Code 68108-3528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 156.30
Name of Employer (for Individual) Self	Occupation (for Individual) Property Management	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1044.55	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mears, Christian, Alan, ,		Date of Receipt MM / DD / YYYY 07 / 10 / 2024
Mailing Address 6151 MOUNTAINDALE RD		Transaction ID : SA11AI.254944
City THURMONT	State MD	Zip Code 21788-2712
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.15
Name of Employer (for Individual) T. Rowe Price	Occupation (for Individual) IT	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 724.85	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Merriman, Allen, Richard, ,		Date of Receipt MM / DD / YYYY 07 / 09 / 2024
Mailing Address 40 GOVERNOR WENTWORTH RD		Transaction ID : SA11AI.254956
City AMHERST	State NH	Zip Code 03031-3008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.80
Name of Employer (for Individual) AlixPartners	Occupation (for Individual) Management Consultant	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 432.60	

SUBTOTAL of Receipts This Page (optional).....▶	223.25
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 84 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Meyer, Andrew, Robert, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2142 1ST AVE APT 6
 City Grafton State WI Zip Code 53024-2568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Charter Manufacturing Occupation (for Individual) Steel production
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 488.83

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.254958
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

B. Meyer, Vern, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1703 SUNSET ISLES RD
 City FORT PIERCE State FL Zip Code 34949-3433
 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 ▼ 1000.00

Date of Receipt 07 / 29 / 2024
Transaction ID : SA11AI.254960
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

C. Miller, Eric, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 441 MEETING ST
 City CHARLESTON State SC Zip Code 29403-7815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Paddle Inc. Occupation (for Individual) Sr Product Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 09 / 2024
Transaction ID : SA11AI.254968
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	210.26
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 85 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Mirkovic, Nemanja, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2942 W 5TH ST
 City BROOKLYN State NY Zip Code 11224-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Transit Insurance Occupation (for Individual) Senior Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 09 / 2024
Transaction ID : SA11AI.254986
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

B. Mitchell, Justico, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NEELY AVE
 City SPARTANBURG State SC Zip Code 29302-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed - Emerging Communication Occupation (for Individual) business owner/manager - network cat
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.10

Date of Receipt 07 / 03 / 2024
Transaction ID : SA11AI.254990
 Amount of Each Receipt this Period 61.80
 Memo Item
 Contribution

C. Moberly, Sean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1623 District Dr
 City Morgantown State WV Zip Code 26505-3835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Insitu Occupation (for Individual) Operator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 483.00

Date of Receipt 07 / 07 / 2024
Transaction ID : SA11AI.255000
 Amount of Each Receipt this Period 69.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	172.80
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 86 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Mohar, Brent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 CREEK SIDE CT
 City KENNEDALE State TX Zip Code 76060-5401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.56

Date of Receipt 07 / 24 / 2024
Transaction ID : SA11AI.255003
 Amount of Each Receipt this Period 43.76
 Memo Item
 Contribution

B. Molinar, Brendan, Kirk, , PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15525 RATHANGAN DR
 City Charlotte State NC Zip Code 28273-7012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lash Group Occupation (for Individual) Data Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.56

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.255005
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

C. Montgomery, Eric, Gawaine, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4131 BELLA ISLE CIR
 City Kissimmee State FL Zip Code 34746-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Sub Teacher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 687.17

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.255011
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	108.02
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 87 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Moomey, Christopher, , ,

Mailing Address **141 GREENWOOD AVE**

City HOT SPRINGS	State AR	Zip Code 71913-4428
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Craft Manufacturing and Tooling	Occupation (for Individual) Machine operator
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.93

Date of Receipt
07 / 01 / 2024

Transaction ID : SA11AI.255014

Amount of Each Receipt this Period
33.99

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Moomey, Christopher, , ,

Mailing Address **141 GREENWOOD AVE**

City HOT SPRINGS	State AR	Zip Code 71913-4428
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Craft Manufacturing and Tooling	Occupation (for Individual) Machine operator
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.92

Date of Receipt
07 / 31 / 2024

Transaction ID : SA11AI.255013

Amount of Each Receipt this Period
33.99

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Morgan, Colin, , ,

Mailing Address **27730 NE 146TH WAY**

City DUVALL	State WA	Zip Code 98019-6336
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Software Company	Occupation (for Individual) Programmer
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
727.40

Date of Receipt
07 / 01 / 2024

Transaction ID : SA11AI.255027

Amount of Each Receipt this Period
25.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	92.98
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 88 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Morlock, Len, , Mr.,		Date of Receipt
Mailing Address 5963 Mill Road Ext		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2024"/>
City Mayville	State NY	Zip Code 14757-9710
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.255031
Name of Employer (for Individual) Siemens		Occupation (for Individual) Drafter
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="433.15"/>	Amount of Each Receipt this Period <input type="text" value="21.00"/>
		<input type="checkbox"/> Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Morris, John, , Mr.,		Date of Receipt
Mailing Address 1426 E DOUGLAS ST		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2024"/>
City Casa Grande	State AZ	Zip Code 85122-1789
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.255034
Name of Employer (for Individual) Casa Grande Union High School		Occupation (for Individual) Certified Educator
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="314.06"/>	Amount of Each Receipt this Period <input type="text" value="13.39"/>
		<input type="checkbox"/> Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Morris, Jonathan, , ,		Date of Receipt
Mailing Address 645 W 9TH ST		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2024"/>
City Kemp	State TX	Zip Code 75143-4785
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.255035
Name of Employer (for Individual) Encore		Occupation (for Individual) AV Project Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="260.30"/>	Amount of Each Receipt this Period <input type="text" value="5.15"/>
		<input type="checkbox"/> Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="39.54"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 89 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Moulton, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 RILEY CREEK RD
 City NORMANDY State TN Zip Code 37360-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Motlow State Community College Occupation (for Individual) Instructor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255041
 Amount of Each Receipt this Period 100.00
 Memo Item
 Contribution

B. Mounteer, John, Carlyle, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 S OCEAN DR APT 1004
 City HOLLYWOOD State FL Zip Code 33019-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 516.80

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.255042
 Amount of Each Receipt this Period 51.50
 Memo Item
 Contribution

C. Munchmeyer, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 TWIN EAGLES DR
 City CELINA State TX Zip Code 75009-4698
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Neuman Aluminium Occupation (for Individual) Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 855.33

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.255050
 Amount of Each Receipt this Period 60.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	211.50
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 90 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Muserlian, Matthew, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 GABLES PL

City KINGSPORT	State TN	Zip Code 37664-3928
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Springhill Suites Marriott	Occupation (for Individual) Hotel General Manager
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2024

Transaction ID : SA11AI.255062

Amount of Each Receipt this Period
43.26

Memo Item
Contribution

B. Nellis, Monica, , , I
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) V Agxtunkcfxi	Occupation (for Individual) Limited Offer on Epson PowerLite 1288
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1030.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2024

Transaction ID : SA11AI.255072

Amount of Each Receipt this Period
1030.00

Memo Item
Contribution

C. Newlin, David, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5882 BREWER RD

City MASON	State OH	Zip Code 45040-9239
---------------	-------------	------------------------

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

Name of Employer (for Individual) West Chester Twp	Occupation (for Individual) Firefighter
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
432.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2024

Transaction ID : SA11AI.255081

Amount of Each Receipt this Period
61.80

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1135.06
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 91 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Nichols, Byron, K, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 HOLLY ST
 City KANSAS CITY State MO Zip Code 64114-3528
 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 ▼ 350.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255091
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

B. Niven, Larry, VC, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5505 TOPEKA DR
 City TARZANA State CA Zip Code 91356-3222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 623.05

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255096
 Amount of Each Receipt this Period 104.60
 Memo Item
 Contribution

C. O'Dell, Alexander, J, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 PRAIRIE MOON DR
 City DAVIS JUNCTION State IL Zip Code 61020-9401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Maplehurst Farms Occupation (for Individual) Agronomy Employee
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 206.38

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255113
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	180.35
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 92 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Ogle, William, Charles, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43804 PARAMOUNT PL
 City CHANTILLY State VA Zip Code 20152-5709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Azure Summit Technology Occupation (for Individual) Principal Systems Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 07 / 11 / 2024
Transaction ID : SA11AI.255118
 Amount of Each Receipt this Period 25.00
 Memo Item
 Contribution

B. Olson, Charles, Bernard, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1441 BELLEVUE AVE APT E
 City BURLINGAME State CA Zip Code 94010-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) San Mateo Union High School District Occupation (for Individual) Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.58

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.255124
 Amount of Each Receipt this Period 26.00
 Memo Item
 Contribution

C. Ormiston, Lee, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18894 E Colorado Dr
 City Aurora State CO Zip Code 80017-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Best Efforts Info Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 22 / 2024
Transaction ID : SA11AI.255129
 Amount of Each Receipt this Period 1500.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	1551.00
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 93 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Osborne, Steven, Ray, ,

Mailing Address 412 RIVER OAKS DR

City LULING	State LA	Zip Code 70070-2144
----------------	-------------	------------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) chemical engineer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.255132

Amount of Each Receipt this Period
84.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Owens, John, , ,

Mailing Address 6311 14TH ST N

City ST PETERSBURG	State FL	Zip Code 33702-7317
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RJ Owens Roofing	Occupation (for Individual) Roofer
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.255136

Amount of Each Receipt this Period
21.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Pakko, Michael, R., Dr.,

Mailing Address 21400 Lake Vista Dr

City Roland	State AR	Zip Code 72135-9639
----------------	-------------	------------------------

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

Name of Employer (for Individual) University of Arkansas At Little Rock	Occupation (for Individual) Economist
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
386.54

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2024

Transaction ID : SA11AI.255141

Amount of Each Receipt this Period
21.63

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	126.63
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 94 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Panella, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 WILLOWBROOK DR
 City N BRUNSWICK State NJ Zip Code 08902-1238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Essendant Occupation (for Individual) Warehouse worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.255145
 Amount of Each Receipt this Period 30.00
 Memo Item
 Contribution

B. Pappert, Carl, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5107 KING ARTHUR WAY
 City CHEYENNE State WY Zip Code 82009-4908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired USAF senior NCO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 07 / 30 / 2024
Transaction ID : SA11AI.255148
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

C. Patterson, Lucas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19400 WYANDOTTE ST UNIT 35
 City Los Angeles State CA Zip Code 91335-3586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CMGIA Occupation (for Individual) Senior Underwriter Assistant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255161
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	99.01
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 95 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Paulson, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 4th St SW
 City New Prague State MN Zip Code 56071-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GDMS Occupation (for Individual) SysAdmin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 609.75

Date of Receipt 07 / 24 / 2024
Transaction ID : SA11AI.255165
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

B. Peirce, Arjen, William, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 154
 City GATES MILLS State OH Zip Code 44040-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Calix Occupation (for Individual) Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255175
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

C. Peters, Timothy, Owen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12328 GALESVILLE DR
 City GAITHERSBURG State MD Zip Code 20878-2077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vie de France Yamazaki, Inc. Occupation (for Individual) Programmer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 231.75

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255186
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	80.75
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 96 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Peterson, Scott, Robert, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 MAHLMANN ST
 City ROSENBERG State TX Zip Code 77471-3914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Transmodal Corp. Occupation (for Individual) Customs Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 629.04

Date of Receipt 07 / 27 / 2024
Transaction ID : SA11AI.255192
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

B. Petrocelli, Dennis, , , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7711 KENMORE CIR
 City RICHMOND State VA Zip Code 23225-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Commonwealth of Virginia Department of Occupation (for Individual) Psychiatrist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 736.82

Date of Receipt 07 / 27 / 2024
Transaction ID : SA11AI.255194
 Amount of Each Receipt this Period 128.75
 Memo Item
 Contribution

C. Phillips, Stephen, Lee, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 CANTYRE ST
 City PORT WENTWRTH State GA Zip Code 31407-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gulfstream Occupation (for Individual) Aircraft mechanic
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.38

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255211
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	170.75
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 97 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Phillips, Stephen, Lee, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 403 CANTYRE ST

City PORT WENTWRTH	State GA	Zip Code 31407-1811
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Gulfstream	Occupation (for Individual) Aircraft mechanic
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2024

Transaction ID : SA11AI.255212

Amount of Each Receipt this Period
17.76

Memo Item
Contribution

B. Pierce, John, , , Esq
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 93 LAWRENCE ST

City CANTON	State MA	Zip Code 02021-3222
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.255214

Amount of Each Receipt this Period
62.52

Memo Item
Contribution

C. Pittel, Jeffrey, Joseph, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2339 FERNDAL ST

City SYLVAN LAKE	State MI	Zip Code 48320-1617
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Ford Motor Co.	Occupation (for Individual) Engineer
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
713.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2024

Transaction ID : SA11AI.255218

Amount of Each Receipt this Period
21.63

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	101.91
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 98 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Pohler, Clinton, James, Mr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 HI CIR N
 City HORSESHOE BAY State TX Zip Code 78657-5827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Coupa Software Occupation (for Individual) Software Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.255225
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

B. Polsky, Nathan, Robert, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 TIMBERLINE LN
 City ALLEN State TX Zip Code 75002-2342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENEA/Aptilo Networks Occupation (for Individual) Software Delivery Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.18

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255230
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

C. Pope, Tammy, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2700 Eden Rd
 City Benton State AR Zip Code 72015-4797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255232
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	172.15
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 99 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Poss, Jonathan, Charles, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4896 MILLEN DR SE
 City MABLETON State GA Zip Code 30126-1783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Stellantis Financial Services Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1563.00

Date of Receipt 07 / 24 / 2024
Transaction ID : SA11AI.255240
 Amount of Each Receipt this Period 260.50
 Memo Item
 Contribution

B. Puckly, Michael, Joseph, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 Swan Nest
 City South Windsor State CT Zip Code 06074-4312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self Financial Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 12 / 2024
Transaction ID : SA11AI.255263
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Contribution

C. Purvis, James, Weldon, Mr., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2111 OLIVIA DR
 City TALLAHASSEE State FL Zip Code 32308-6164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 MTC South, Inc. Wholesale Tires
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 259.56

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255266
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1303.76
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 100 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Quintin, Laura, , ,		Date of Receipt MM / DD / YYYY 07 / 16 / 2024
Mailing Address 936 TURNER CAMP RD		Transaction ID : SA11AI.255275
City INVERNESS	State FL	Zip Code 34453-1261
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Remax	Occupation (for Individual) real estate broker	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RACKAUSKAS, Saul, , Mr,		Date of Receipt MM / DD / YYYY 07 / 05 / 2024
Mailing Address 7604 E AUTUMN LEAF DR		Transaction ID : SA11AI.255278
City TUCSON	State AZ	Zip Code 85756-6130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Engineer	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.28	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ravet, Steve, , ,		Date of Receipt MM / DD / YYYY 07 / 10 / 2024
Mailing Address 1081 HIDDEN HILLS DR		Transaction ID : SA11AI.255290
City DRIPPING SPGS	State TX	Zip Code 78620-3936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Apple	Occupation (for Individual) Engineer	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 101 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Rectenwald, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2359 RAILROAD ST
 City PITTSBURGH State PA Zip Code 15222-5606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rectenwald for President Occupation (for Individual) Candidate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1364.90

Date of Receipt 07 / 04 / 2024
Transaction ID : SA11AI.255297
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

B. Reed, James, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21495 ARBOR GLEN CT
 City BROADLANDS State VA Zip Code 20148-5070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255302
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

C. Reeside, William, O, Mr, Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4214 SETTLER HEIGHTS DR
 City FORT MILL State SC Zip Code 29708-6402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Habitat For Humanity - York County Occupation (for Individual) Fleet Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.90

Date of Receipt 07 / 11 / 2024
Transaction ID : SA11AI.255310
 Amount of Each Receipt this Period 104.60
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	152.86
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 102 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Reeside, William, O, Mr, Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4214 SETTLER HEIGHTS DR
 City FORT MILL State SC Zip Code 29708-6402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Habitat For Humanity - York County Occupation (for Individual) Fleet Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.16

Date of Receipt **07 / 22 / 2024**
Transaction ID : SA11AI.255311
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

B. Reifenberger, Charles, Wesley, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1007 SHERIDAN ST
 City MEMPHIS State TN Zip Code 38107-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Walker J Walker Occupation (for Individual) Mechanical Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.24

Date of Receipt **07 / 23 / 2024**
Transaction ID : SA11AI.255313
 Amount of Each Receipt this Period 20.00
 Memo Item
 Contribution

C. Reilly, Lauren, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 GREENWICH ST APT 3101
 City NEW YORK State NY Zip Code 10006-2244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Best Efforts Info Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt **07 / 01 / 2024**
Transaction ID : SA11AI.255314
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	105.26
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 103 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Reinhardt, Barbara, Rose, Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3554 OVERLAND DR
 City HOLIDAY State FL Zip Code 34691-1127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCLTech Occupation (for Individual) Global Knowledge Management Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.12

Date of Receipt 07 / 23 / 2024
Transaction ID : SA11AI.255315
 Amount of Each Receipt this Period 62.52
 Memo Item
 Contribution

B. Reinhart, Steven, James, , Sr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 S 4TH AVE
 City Ridgefield State WA Zip Code 98642-3845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Best Efforts Info Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 278.10

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255317
 Amount of Each Receipt this Period 46.35
 Memo Item
 Contribution

C. RHEEL, JAYDEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 RUTH CT
 City MIDDLETOWN State NY Zip Code 10940-5321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R.I. SURESKY & SON Occupation (for Individual) ASSISTANT FLEET MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.255325
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	150.87
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 104 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Ricci, Mario, Thomas, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2747 W 106TH CIR
 City WESTMINSTER State CO Zip Code 80234-3558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Software Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 782.18

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255328
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

B. Richard, Josh, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 High Bridge Rd
 City Hubbardston State MA Zip Code 01452-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cadel Chemical & Supply Occupation (for Individual) Mechanical Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255329
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Richards, Wells, Phillip, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 COUNTY ROAD 210
 City EUREKA SPGS State AR Zip Code 72632-9437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Business owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255331
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	90.26
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 105 OF 259
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Rigg, Morgan, L., Mr.,

Mailing Address 3284 County Road 53

City Butler State IN Zip Code 46721-9615

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

Name of Employer (for Individual) Trinity Lutheran Church Occupation (for Individual) Custodian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **315.13**

Date of Receipt **07 / 13 / 2024**

Transaction ID : SA11AI.255341

Amount of Each Receipt this Period **10.00**

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Robbins, Ryan, , ,

Mailing Address 1134 LEWISTON RD

City NEW GLOUCESTR State ME Zip Code 04260-3403

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

Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Best Efforts Info Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **302.82**

Date of Receipt **07 / 01 / 2024**

Transaction ID : SA11AI.255351

Amount of Each Receipt this Period **43.26**

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Roberson, John, David, ,

Mailing Address 802 BANISTER LN

City AUSTIN State TX Zip Code 78704-6958

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

Name of Employer (for Individual) Prime Tax Group LLC Occupation (for Individual) Tax Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1474.31**

Date of Receipt **07 / 20 / 2024**

Transaction ID : SA11AI.255352

Amount of Each Receipt this Period **128.75**

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... **182.01**

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 106 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Rollin, Michael, John, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 Alameda Dr Apt 106
 City Palm Springs State FL Zip Code 33461-1614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Publix Supermarkets, Inc. Occupation (for Individual) Cashier
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 03 / 2024
Transaction ID : SA11AI.255372
 Amount of Each Receipt this Period 25.00
 Memo Item
 Contribution

B. Roques, Andre, Joseph, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 393 GOOCH LN
 City Madison State AL Zip Code 35758-8366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAIC Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255380
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Rose, Daniel, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 613 Beachport Dr
 City Port Hueneme State CA Zip Code 93041-3066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PVCC Occupation (for Individual) Facility Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 15 / 2024
Transaction ID : SA11AI.255381
 Amount of Each Receipt this Period 250.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	317.00
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 107 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Ruby, David, Paul, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1119 E LE MARCHE AVE

City PHOENIX	State AZ	Zip Code 85022-3136
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Prof Medical Doctors
--	---

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
 07 / 10 / 2024

Transaction ID : SA11AI.255395

Amount of Each Receipt this Period
250.00

Memo Item
Contribution

B. Ruehle, Ernest, H, Mr, Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 333

City BRODHEADSVLLE	State PA	Zip Code 18322-3330
-----------------------	-------------	------------------------

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 ▼
254.78

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2024

Transaction ID : SA11AI.255398

Amount of Each Receipt this Period
21.63

Memo Item
Contribution

C. Ruehle, Ernest, H, Mr, Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 333

City BRODHEADSVLLE	State PA	Zip Code 18322-3330
-----------------------	-------------	------------------------

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 ▼
279.78

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2024

Transaction ID : SA11AI.255399

Amount of Each Receipt this Period
25.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	296.63
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 108 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Rufo, Michael, Joseph, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1971 SW LEAFY RD
 City PORT ST LUCIE State FL Zip Code 34953-1328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) Na
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 927.00

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.255401
 Amount of Each Receipt this Period 154.50
 Memo Item
 Contribution

B. Russomanno, Christopher, G, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 EAST DR
 City BORDENTOWN State NJ Zip Code 08505-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allied Universal Solutions Occupation (for Individual) Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.59

Date of Receipt 07 / 26 / 2024
Transaction ID : SA11AI.255412
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

C. Rutledge, Walter, James Bennett, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4264 E MAPLEWOOD WAY
 City CENTENNIAL State CO Zip Code 80121-3352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 07 / 21 / 2024
Transaction ID : SA11AI.255415
 Amount of Each Receipt this Period 128.75
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	288.25
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 109 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Rycroft, Daniel, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 PALAU PL
 City COSTA MESA State CA Zip Code 92626-3716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Pool Service
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **07 / 01 / 2024**
Transaction ID : SA11AI.255417
 Amount of Each Receipt this Period **30.00**
 Memo Item
 Contribution

B. S, Ben, , , Ret
 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) Ywftebt Vcx B Occupation (for Individual) Benefit from a limited-time deal: 20%
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1030.00**

Date of Receipt **07 / 06 / 2024**
Transaction ID : SA11AI.255419
 Amount of Each Receipt this Period **1030.00**
 Memo Item
 Contribution

C. S, Tia, , , DO
 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) Rhsm Y Clr Ok Occupation (for Individual) Qualified Experts Helping You
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1030.00**

Date of Receipt **07 / 08 / 2024**
Transaction ID : SA11AI.255421
 Amount of Each Receipt this Period **1030.00**
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	2090.00
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 110 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Sanders, Kobe, , Lord, I

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 827 HARRISON ST

City DENVER	State CO	Zip Code 80206-4041
----------------	-------------	------------------------

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

Name of Employer (for Individual) None of Your Damn Business	Occupation (for Individual) None of your damn business
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2024

Transaction ID : SA11AI.255430

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

B. Satterfield, Tate, , Mr.,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1138 ADDINGTON LN

City WALESKA	State GA	Zip Code 30183-2682
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Dynamic Installations	Occupation (for Individual) Construction
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2024

Transaction ID : SA11AI.255436

Amount of Each Receipt this Period
51.50

Memo Item
Contribution

C. Schansberg, D Eric, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5312 HIDDEN LAKES BLVD

City JEFFERSONVILLE	State IN	Zip Code 47130-8000
------------------------	-------------	------------------------

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

Name of Employer (for Individual) IU Southeast	Occupation (for Individual) Econ professor
---	---

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
07		06		2024

Transaction ID : SA11AI.255447

Amount of Each Receipt this Period
150.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	243.50
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 111 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Schoeb, Trenton, Robert, Dr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 ODUM CREST LN
 City HOOVER State AL Zip Code 35226-1093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Alabama At Birmingham Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 03 / 2024
Transaction ID : SA11AI.255459
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

B. Schommer, Ty, Anthony, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 HUFFMAN RD # 24-539
 City ANCHORAGE State AK Zip Code 99515-3516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Arbor Capital Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255460
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Schrader, David, Keith, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 17TH ST
 City HERMOSA BEACH State CA Zip Code 90254-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Not Applicable
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 335.20

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.255462
 Amount of Each Receipt this Period 104.60
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	196.60
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 112 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Schrader, David, Keith, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 17TH ST

City HERMOSA BEACH	State CA	Zip Code 90254-3408
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Not Applicable
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
356.20

Date of Receipt
MM / DD / YYYY
07 / 31 / 2024

Transaction ID : SA11AI.255461

Amount of Each Receipt this Period
21.00

Memo Item
Contribution

B. Schulman, Matthew, Eliot, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3700 WHITE OAK RD

City FREDERICKSBURG	State TX	Zip Code 78624-7600
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.91

Date of Receipt
MM / DD / YYYY
07 / 20 / 2024

Transaction ID : SA11AI.255468

Amount of Each Receipt this Period
21.88

Memo Item
Contribution

C. Schult, William, David, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 651 MEADOW WOOD DR

City CRESCENT SPGS	State KY	Zip Code 41017-4618
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Trinity Aging Life Advisors	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
530.81

Date of Receipt
MM / DD / YYYY
07 / 01 / 2024

Transaction ID : SA11AI.255470

Amount of Each Receipt this Period
25.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	67.88
TOTAL This Period (last page this line number only).....	

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

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Schwartz, Timothy, Joseph, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5460 KINGFISHER AVE
 City BURLINGTON State KY Zip Code 41005-2011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Unemployed Occupation (for Individual) Unemployed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 376.15

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255479
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

B. Scott, Heather, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Richland Dr
 City Shelbyville State TN Zip Code 37160-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.31

Date of Receipt 07 / 22 / 2024
Transaction ID : SA11AI.255486
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

C. Serrato, Pablo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 NW 12TH AVE APT 210
 City PORTLAND State OR Zip Code 97209-3067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Civis Occupation (for Individual) Product management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 14 / 2024
Transaction ID : SA11AI.255500
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	200.75
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 114 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Severson, Rodney, G., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 Orchard Dr
 City Johnson City State TN Zip Code 37604-5328
 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 ▼ 210.00

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.255504
 Amount of Each Receipt this Period 30.00
 Memo Item
 Contribution

B. Severson, Shawn, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7124 6TH AVE N
 City ST PETERSBURG State FL Zip Code 33710-7532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Best Efforts Info Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 03 / 2024
Transaction ID : SA11AI.255505
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Sewell, James, J, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 917 WESTLAWN AVE
 City RACINE State WI Zip Code 53405-2448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Unico, Inc. Occupation (for Individual) software engineer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 436.26

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.255507
 Amount of Each Receipt this Period 25.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	97.00
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 115 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Shadick, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 KENLYN DR
 City COLONIE State NY Zip Code 12205-1202
 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 ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255512
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

B. Shavers, Brandon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16220 OSCEOLA TRL
 City EDMOND State OK Zip Code 73013-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Business owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.255523
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Shuey, Patrick Andrew, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 Fairfax Rd
 City Pittsburgh State PA Zip Code 15221-4615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Honeywell Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.255536
 Amount of Each Receipt this Period 30.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶ 114.00
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 116 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Shurley, Guy, Gibbs, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 827 LINCOLN ST
 City LONGMONT State CO Zip Code 80501-4431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 25 / 2024**
Transaction ID : SA11AI.255540
 Amount of Each Receipt this Period 30.00
 Memo Item
 Contribution

B. Silvestri, Joseph, Philip, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3836 SUMMER BREEZE CIR
 City LAS VEGAS State NV Zip Code 89108-5418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Clark County School District Occupation (for Individual) Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 697.01

Date of Receipt **07 / 01 / 2024**
Transaction ID : SA11AI.255550
 Amount of Each Receipt this Period 10.00
 Memo Item
 Contribution

C. Simonson, Mark, Lee, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1496 Raymond Ave
 City Saint Paul State MN Zip Code 55108-1433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Graphic designer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 795.00

Date of Receipt **07 / 31 / 2024**
Transaction ID : SA11AI.255554
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	61.00
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 117 OF 259 (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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Simpson, Bradley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 MILFORD RD
 City NEWPORT State PA Zip Code 17074-7476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carlisle Construction Materials Occupation (for Individual) Production
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 872.05

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255555
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

B. Skreden, Cameron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 JAMES REED
 City TRUCKEE State CA Zip Code 96161-5191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Storage Star Occupation (for Individual) Real Estate Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.12

Date of Receipt 07 / 09 / 2024
Transaction ID : SA11AI.255561
 Amount of Each Receipt this Period 62.52
 Memo Item
 Contribution

C. Smith, Joshua, Michael, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8160 ROSSMAN HWY
 City DIMONDALE State MI Zip Code 48821-9715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) Software Architect
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.82

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255582
 Amount of Each Receipt this Period 43.26
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	110.93
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 118 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Smith, Joshua, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4805 WESTBROOKE PL
 City WDM State IA Zip Code 50266-5485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ascent Occupation (for Individual) Critical facilities engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.74

Date of Receipt 07 / 11 / 2024
Transaction ID : SA11AI.255583
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

B. Smith, Lloyd, Edward, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4706 N TROY ST
 City CHICAGO State IL Zip Code 60625-4423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Land Speculator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.255585
 Amount of Each Receipt this Period 100.00
 Memo Item
 Contribution

C. Sosa Azpurua, Andres Fernando, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6150 SW 84TH ST
 City SOUTH MIAMI State FL Zip Code 33143-8140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Info Requested Occupation (for Individual) Best Efforts Info Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 07 / 11 / 2024
Transaction ID : SA11AI.255610
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	147.00
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 119 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Standridge, Joshua, , Dr., DVM
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63533 US HIGHWAY 231
 City CLEVELAND State AL Zip Code 35049-3456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self, Address Same As Above Occupation (for Individual) Veterinarian
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3263.31

Date of Receipt 07 / 19 / 2024
Transaction ID : SA11AI.255633
 Amount of Each Receipt this Period 130.25
 Memo Item
 Contribution

B. Stecki, Luke, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 W 8TH ST
 City Ashtabula State OH Zip Code 44004-2331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delta Railroad Construction Occupation (for Individual) Purchasing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255640
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Steinmetz, James, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 730 JONES RD
 City VESTAL State NY Zip Code 13850-5228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ascension Health Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 621.28

Date of Receipt 07 / 19 / 2024
Transaction ID : SA11AI.255648
 Amount of Each Receipt this Period 62.52
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	234.77
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 120 OF 259
	<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Steinmetz, James, R, ,

Mailing Address 730 JONES RD

City VESTAL	State NY	Zip Code 13850-5228
----------------	-------------	------------------------

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

Name of Employer (for Individual) Ascension Health	Occupation (for Individual) Physician
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
724.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2024
Transaction ID : SA11AI.255647

Amount of Each Receipt this Period
103.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Stern, Lessing, , ,

Mailing Address 4101 WOODEN SHOE LN

City PEOA	State UT	Zip Code 84061-9709
--------------	-------------	------------------------

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

Name of Employer (for Individual) Ten Eighty, LLC	Occupation (for Individual) Executive
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
45000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2024
Transaction ID : SA11AI.255651

Amount of Each Receipt this Period
15000.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Stewart, John, S., Mr.,

Mailing Address 855 BRYN MAWR DR

City GAHANNA	State OH	Zip Code 43230-3840
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Transinternational System, Inc.	Occupation (for Individual) Executive
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2024
Transaction ID : SA11AI.255657

Amount of Each Receipt this Period
40.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	15143.00
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 121 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Stultz, John, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 MULLIGAN RD
 City ATHENS State OH Zip Code 45701-3737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/a Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 07 / 17 / 2024
Transaction ID : SA11AI.255679
 Amount of Each Receipt this Period 33.00
 Memo Item
 Contribution

B. Sweeney, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9415 CARMEL DR
 City JOHNSTON State IA Zip Code 50131-2832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hyperion Field Club Occupation (for Individual) Server
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255691
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Talbert, Miriam, , , USN Ret
 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) Vwynfb Oqzm B Occupation (for Individual) Improve Search Engine Traffic with Exc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1030.00

Date of Receipt 07 / 11 / 2024
Transaction ID : SA11AI.255695
 Amount of Each Receipt this Period 1030.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1105.00
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 122 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Tangen, Chip, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10740 AMHERST WAY
 City INVER GROVE State MN Zip Code 55077-5477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Enterprise Minnesota Occupation (for Individual) Relationship manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.88

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255698
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

B. Test, Charles, Davol, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 2ND AVE S
 City MINNEAPOLIS State MN Zip Code 55408-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.255711
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

C. Thompson, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2135 E 3325 N
 City LAYTON State UT Zip Code 84040-2417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sharon Thompson Occupation (for Individual) Caregiver
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.50

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255717
 Amount of Each Receipt this Period 130.25
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	260.25
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 123 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Thompson, Stewart, Alan, Dr., PhD

Mailing Address **27351 E EL MACERO DR**

City EL MACERO	State CA	Zip Code 95618-1004
--------------------------	--------------------	-------------------------------

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 ▼ **519.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2024

Transaction ID : SA11AI.255721

Amount of Each Receipt this Period
86.52

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Tiffany, Philip, B., ,

Mailing Address **2191 NW 87TH AVE**

City SUNRISE	State FL	Zip Code 33322-3821
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) JM Family Enterprises	Occupation (for Individual) IT Manager
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **302.82**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2024

Transaction ID : SA11AI.255723

Amount of Each Receipt this Period
43.26

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Timis, Silviu, , ,

Mailing Address **411 BAINBRIDGE ST APT 204**

City RICHMOND	State VA	Zip Code 23224-2385
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Sweetie Boy Transportation	Occupation (for Individual) Truck Driver
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2024

Transaction ID : SA11AI.255727

Amount of Each Receipt this Period
125.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	254.78
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 124 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Tinsley, Maritza, , , PhD
 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)
 Htrlpiek Why Spend More Get Results for Less

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1030.00**

Date of Receipt **07 / 14 / 2024**

Transaction ID : SA11AI.255729

Amount of Each Receipt this Period **1030.00**

Memo Item
Contribution

B. Todd, Jeremy, Ryan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 116 CARRIAGE PARK DR

City State Zip Code
 ALEXANDRIA KY 41001-1079

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

Name of Employer (for Individual) Occupation (for Individual)
 Guardian Savings Bank Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1251.25**

Date of Receipt **07 / 31 / 2024**

Transaction ID : SA11AI.255733

Amount of Each Receipt this Period **128.75**

Memo Item
Contribution

C. Touchette, Bradley, P, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 606 AVON PL

City State Zip Code
 St Charles MO 63303-6017

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

Name of Employer (for Individual) Occupation (for Individual)
 Self Product Owner

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ **802.00**

Date of Receipt **07 / 01 / 2024**

Transaction ID : SA11AI.255745

Amount of Each Receipt this Period **25.00**

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1183.75
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 125 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Trolinger, John, Boyd, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8572 N CALLE TIOGA
 City TUCSON State AZ Zip Code 85704-6508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Butte College Occupation (for Individual) Teacher, Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.30

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255756
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

B. Unitemized Contribution Refunds
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1444 Duke Street
 City Alexandria State VA Zip Code 22314
 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 ▼ -233.34

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.256230
 Amount of Each Receipt this Period -233.34
 Memo Item
 Contribution Refunds

C. van Dyke, Alexander, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5995 LINCOLN DR
 City EDINA State MN Zip Code 55436-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Verizon Wireless Occupation (for Individual) Retail Sales Associate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 772.50

Date of Receipt 07 / 04 / 2024
Transaction ID : SA11AI.255784
 Amount of Each Receipt this Period 128.75
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	- 78.84
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 126 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Vega, Julian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 BISHOP LAMY RD
 City LAMY State NM Zip Code 87540-9602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Christus St Vincent Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.52

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255805
 Amount of Each Receipt this Period 25.00
 Memo Item
 Contribution

B. Vega, Julian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 BISHOP LAMY RD
 City LAMY State NM Zip Code 87540-9602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Christus St Vincent Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.28

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255806
 Amount of Each Receipt this Period 43.76
 Memo Item
 Contribution

C. Ven Johnson, Wes, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 G St SW
 City Washington State DC Zip Code 20024-2407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Triad Resources Occupation (for Individual) Performance Improvement Co
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.78

Date of Receipt 07 / 02 / 2024
Transaction ID : SA11AI.255811
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	89.76
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 127 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Ven Johnson, Wes, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 G St SW
 City Washington State DC Zip Code 20024-2407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Triad Resources Occupation (for Individual) Performance Improvement Co
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 07 / 31 / 2024
Transaction ID : SA11AI.255810
 Amount of Each Receipt this Period 21.63
 Memo Item
 Contribution

B. Veranth, Joe, , ,
 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) Retired Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 24 / 2024
Transaction ID : SA11AI.255815
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Contribution

C. Verhage, Robert, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14402 Westway Ln
 City Houston State TX Zip Code 77077-1708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Plant Food Occupation (for Individual) Credit Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.68

Date of Receipt 07 / 15 / 2024
Transaction ID : SA11AI.255816
 Amount of Each Receipt this Period 21.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	1042.63
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 128 OF 259
<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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Ware, Ethan, Neal, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 N SPOT RD
 City Powells Point State NC Zip Code 27966-9501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Town of Nags Head Occupation (for Individual) Water Plant Operator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 422.95

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255849
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

B. Webb, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 CACTUS DR
 City LOS LUNAS State NM Zip Code 87031-6733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Navy Occupation (for Individual) Sailor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 07 / 09 / 2024
Transaction ID : SA11AI.255869
 Amount of Each Receipt this Period 42.00
 Memo Item
 Contribution

C. Webb, Don, C, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 N JEFFERSON ST
 City ROBINSON State IL Zip Code 62454-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 07 / 20 / 2024
Transaction ID : SA11AI.255871
 Amount of Each Receipt this Period 103.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	150.15
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 129 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Wegner, Neal, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17450 Bolter Ln
 City Brookfield State WI Zip Code 53045-3456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/a Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 17 / 2024
Transaction ID : SA11AI.255875
 Amount of Each Receipt this Period 100.00
 Memo Item
 Contribution

B. Werley, Drew, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5016 Timberview Dr
 City Vermilion State OH Zip Code 44089-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Premier Toyota Occupation (for Individual) Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.18

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255885
 Amount of Each Receipt this Period 5.15
 Memo Item
 Contribution

C. Wescott, Thomas, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86-177 Moeha St
 City Waianae State HI Zip Code 96792-4407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Commercial Plumbing Inc. Occupation (for Individual) Plumber
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 901.25

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255886
 Amount of Each Receipt this Period 128.75
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	233.90
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 130 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Westmoreland, Gary, Robert, Mr.,

Mailing Address 4659 OLD SAND RD

City SCHUYLER	State VA	Zip Code 22969-1631
------------------	-------------	------------------------

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

Name of Employer (for Individual) RMC Events	Occupation (for Individual) Security Officer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2024

Transaction ID : SA11AI.255891

Amount of Each Receipt this Period
25.00

Memo Item
Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Westmoreland, Gary, Robert, Mr.,

Mailing Address 4659 OLD SAND RD

City SCHUYLER	State VA	Zip Code 22969-1631
------------------	-------------	------------------------

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

Name of Employer (for Individual) RMC Events	Occupation (for Individual) Security Officer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2024

Transaction ID : SA11AI.255892

Amount of Each Receipt this Period
15.00

Memo Item
Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wheeler, Brian, , ,

Mailing Address 21 COVENTRY LN

City DALEVILLE	State VA	Zip Code 24083-3634
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2024

Transaction ID : SA11AI.255895

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	82.00
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 131 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Wicklund, Matthew, Paul, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5491 E Geddes Pl
 City Centennial State CO Zip Code 80122-2560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Colorado Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255913
 Amount of Each Receipt this Period 100.00
 Memo Item
 Contribution

B. Wilkie, Crystal, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 568 W 300 S
 City HEYBURN State ID Zip Code 83336-9783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Walmart Occupation (for Individual) Stocker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 841.50

Date of Receipt 07 / 04 / 2024
Transaction ID : SA11AI.255921
 Amount of Each Receipt this Period 156.30
 Memo Item
 Contribution

C. Williams, Jonathan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 368 JUNCO CIR
 City LONGS State SC Zip Code 29568-6972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Fusion Connect Occupation (for Individual) Information Technology
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 770.25

Date of Receipt 07 / 21 / 2024
Transaction ID : SA11AI.255925
 Amount of Each Receipt this Period 13.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	269.30
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 132 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williamson, Taylor, William, ,

Mailing Address 3131 HARDWOOD HAMMOCK DR

City ORLANDO	State FL	Zip Code 32824-7381
-----------------	-------------	------------------------

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

Name of Employer (for Individual) ARCA Intl	Occupation (for Individual) Household Goods
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.255930

Amount of Each Receipt this Period
25.75

Memo Item
Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williamson, Taylor, William, ,

Mailing Address 3131 HARDWOOD HAMMOCK DR

City ORLANDO	State FL	Zip Code 32824-7381
-----------------	-------------	------------------------

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

Name of Employer (for Individual) ARCA Intl	Occupation (for Individual) Household Goods
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2024

Transaction ID : SA11AI.255931

Amount of Each Receipt this Period
25.00

Memo Item
Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wilson, Glenn, L, ,

Mailing Address 1944 DABBS AVE

City NASHVILLE	State TN	Zip Code 37217-1303
-------------------	-------------	------------------------

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

Name of Employer (for Individual) HealthStream	Occupation (for Individual) Network Engineer
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
268.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2024

Transaction ID : SA11AI.255935

Amount of Each Receipt this Period
26.05

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	76.80
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 133 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wilson, Michael, L., Mr.,

Mailing Address 422 JUPITER AVE

City Salina	State KS	Zip Code 67401-7379
----------------	-------------	------------------------

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 ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2024

Transaction ID : SA11AI.255938

Amount of Each Receipt this Period
50.00

Memo Item
Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wimsatt, Robert, , ,

Mailing Address 3802 Church Rd

City Ellicott City	State MD	Zip Code 21043-4504
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Best Efforts Info Requested	Occupation (for Individual) Best Efforts Info Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.255940

Amount of Each Receipt this Period
30.00

Memo Item
Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Windsor, Brett, Andrew, ,

Mailing Address 28085 CAPTIVA SHELL LOOP

City BONITA SPGS	State FL	Zip Code 34135-8625
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIOMT	Occupation (for Individual) Physical Therapist
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11AI.255942

Amount of Each Receipt this Period
125.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	205.00
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 134 OF 259
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wingate, George, Thomas, Mr., IV

Mailing Address 2802 FALLSMONT DR

City FALLSTON	State MD	Zip Code 21047-2247
------------------	-------------	------------------------

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

Name of Employer (for Individual) TryAngle Foods	Occupation (for Individual) Retail rep/sales support
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2024

Transaction ID : SA11AI.255943

Amount of Each Receipt this Period
62.52

Memo Item
Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wolfram, Benjamin, David, ,

Mailing Address 15618 ELSMERE CT

City BOWIE	State MD	Zip Code 20716-2628
---------------	-------------	------------------------

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

Name of Employer (for Individual) Science Applications International Cor	Occupation (for Individual) Analyst
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2024

Transaction ID : SA11AI.255955

Amount of Each Receipt this Period
46.35

Memo Item
Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wolfram, Benjamin, David, ,

Mailing Address 15618 ELSMERE CT

City BOWIE	State MD	Zip Code 20716-2628
---------------	-------------	------------------------

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

Name of Employer (for Individual) Science Applications International Cor	Occupation (for Individual) Analyst
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
576.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2024

Transaction ID : SA11AI.255954

Amount of Each Receipt this Period
36.05

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	144.92
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 135 OF 259		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Woolridge, Dale, W, , PhD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8184 ANTIETAM DR
 City LEWISBERRY State PA Zip Code 17339-9197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255968
 Amount of Each Receipt this Period 50.00
 Memo Item
 Contribution

B. Yared, Kyle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5705 PLEASANT AVE
 City MINNEAPOLIS State MN Zip Code 55419-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Airbnb Occupation (for Individual) Security Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 21 / 2024
Transaction ID : SA11AI.255982
 Amount of Each Receipt this Period 125.00
 Memo Item
 Contribution

C. Yeniscavich, Katherine, Rudd, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 W BOPP RD
 City TUCSON State AZ Zip Code 85746-9360
 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 ▼ 336.37

Date of Receipt 07 / 14 / 2024
Transaction ID : SA11AI.255983
 Amount of Each Receipt this Period 10.30
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	185.30
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 136 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Young, James, Daniel, ,

Mailing Address 145 CESSNA DR

City HAWTHORNE	State FL	Zip Code 32640-4447
-------------------	-------------	------------------------

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 ▼
781.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2024

Transaction ID : SA11AI.255986

Amount of Each Receipt this Period
156.30

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Yuill-Thornton, Alexander, , Mr., II

Mailing Address 4326 Parker Hill Rd

City Santa Rosa	State CA	Zip Code 95404-1320
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Consultant
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2024

Transaction ID : SA11AI.255988

Amount of Each Receipt this Period
42.00

Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Zaun, Nicholas, Alan, ,

Mailing Address 19938 E UNION DR

City CENTENNIAL	State CO	Zip Code 80015-3493
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) I have one
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 04 / 2024

Transaction ID : SA11AI.255994

Amount of Each Receipt this Period
125.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	323.30
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 137 OF 259
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Ziemba, Daniel, Victor, , PE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1457 S SHELDON RD APT 1
 City PLYMOUTH State MI Zip Code 48170-5912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Black & Veatch Occupation (for Individual) Structural Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 812.25

Date of Receipt 07 / 01 / 2024
Transaction ID : SA11AI.255997
 Amount of Each Receipt this Period 10.00
 Memo Item
 Contribution

B. Zimmerman, Edwin, Fred, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7080 GREAT OAKS CR.
 City BURTON State TX Zip Code 77835-5264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.25

Date of Receipt 07 / 27 / 2024
Transaction ID : SA11AI.255998
 Amount of Each Receipt this Period 25.75
 Memo Item
 Contribution

C. Zwart, Peter, Joseph, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 174 WAGON WHEEL RD
 City GAINESVILLE State TX Zip Code 76240-6674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Airline Occupation (for Individual) Pilot
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.30

Date of Receipt 07 / 05 / 2024
Transaction ID : SA11AI.256008
 Amount of Each Receipt this Period 5.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	40.75
TOTAL This Period (last page this line number only).....	59468.13

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 138 OF 259
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. PNC Bank

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 Fifth Avenue

City Pittsburgh	State OR	Zip Code 15222-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) N/A
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2024

Transaction ID : SA15.256010

Amount of Each Receipt this Period
90.45

Memo Item
Interest

B. Twitter

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1355 Market St
Suite 900

City SAN FRANCISCO	State CA	Zip Code 94103-0000
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) N/A
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1940.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2024

Transaction ID : SA15.256014

Amount of Each Receipt this Period
156.93

Memo Item
Vendor Refund

C. Twitter

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1355 Market St
Suite 900

City SAN FRANCISCO	State CA	Zip Code 94103-0000
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) N/A
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2134.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2024

Transaction ID : SA15.256021

Amount of Each Receipt this Period
194.07

Memo Item
Vendor Refund

SUBTOTAL of Receipts This Page (optional).....	441.45
TOTAL This Period (last page this line number only).....	441.45

**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 139 OF 259
<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

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Blair, John, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26410 VASHON HWY SW
 City VASHON State WA Zip Code 98070-8321
 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 ▼ 1055.75

Date of Receipt **07 / 01 / 2024**
Transaction ID : SA17.253617
 Amount of Each Receipt this Period 25.75
 Memo Item
 Legal Account Contribution

B. LaClair, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10180 FENCEPOST LN
 City Traverse City State MI Zip Code 49685-7470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NNF Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 763.00

Date of Receipt **07 / 13 / 2024**
Transaction ID : SA17.254681
 Amount of Each Receipt this Period 25.00
 Memo Item
 Legal Account Contribution

C. McArdle, Angela, Elise, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7200 THANNAS WAY
 City AUSTIN State TX Zip Code 78744-5020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Lp slave
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2146.76

Date of Receipt **07 / 07 / 2024**
Transaction ID : SA17.254893
 Amount of Each Receipt this Period 45.00
 Memo Item
 Legal Account Contribution

SUBTOTAL of Receipts This Page (optional).....	95.75
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 140 OF 259
	<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	

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Peterson, Scott, Robert, ,

Mailing Address 1514 MAHLMANN ST

City ROSENBERG	State TX	Zip Code 77471-3914
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Transmodal Corp.	Occupation (for Individual) Customs Broker
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
608.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2024

Transaction ID : SA17.255193

Amount of Each Receipt this Period
10.00

Memo Item
Legal Account Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yuskavage, Marybeth, , Dr.,

Mailing Address 8433 N Bond St

City Fresno	State CA	Zip Code 93720-2150
----------------	-------------	------------------------

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

Name of Employer (for Individual) Clovis Medical Group	Occupation (for Individual) Physician
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2024

Transaction ID : SA17.255990

Amount of Each Receipt this Period
10.00

Memo Item
Legal Account Contribution

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).....	20.00
TOTAL This Period (last page this line number only).....	115.75

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

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

Form B: Aiken, David, , , 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, Amount of Each Disbursement, and Memo Item checkbox.

Form C: Alexandria Renew Ent 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, Amount of Each Disbursement, and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 2024.84
TOTAL This Period (last page this line number only)

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

Form/Schedule: SB21B

Transaction ID : SB21B.256158

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. All In One Accounting

Mailing Address 1715 Yankee Doodle Rd
Ste 305

City Eagan State MN Zip Code 55121-1697

Purpose of Disbursement

Accounting Service

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25605

Amount of Each Disbursement this Period

[REDACTED] 2705.55

Memo Item

Full Name (Last, First, Middle Initial)

B. All In One Accounting

Mailing Address 1715 Yankee Doodle Rd
Ste 305

City Eagan State MN Zip Code 55121-1697

Purpose of Disbursement

Accounting Service

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25605

Amount of Each Disbursement this Period

[REDACTED] 4433.17

Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon Web Services

Mailing Address 410 Terry Ave North

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement

Software, Hardware & Other IT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25615

Amount of Each Disbursement this Period

[REDACTED] 101.24

Memo Item

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

[REDACTED] 7239.96

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Amazon Web Services

Mailing Address 410 Terry Ave North

City
Seattle

State
WA

Zip Code
98109-5210

Purpose of Disbursement
Software, Hardware & Other IT

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

[REDACTED] 28.44

Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address PO BOX 619616

City
DFW Airport

State
TX

Zip Code
75261-9616

Purpose of Disbursement
Outreach & Activism Expense

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25611

Amount of Each Disbursement this Period

[REDACTED] 428.95

Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address PO BOX 619616

City
DFW Airport

State
TX

Zip Code
75261-9616

Purpose of Disbursement
Outreach & Activism Expense

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25612

Amount of Each Disbursement this Period

[REDACTED] 22.54

Memo Item

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

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

[REDACTED] 28.44

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256119

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256120

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address PO BOX 619616

City
DFW Airport

State
TX

Zip Code
75261-9616

Purpose of Disbursement
Outreach & Activism Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25612

Amount of Each Disbursement this Period

[REDACTED] 23.79

Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address PO BOX 619616

City
DFW Airport

State
TX

Zip Code
75261-9616

Purpose of Disbursement
Travel, Meeting, & Meals Exp

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25621

Amount of Each Disbursement this Period

[REDACTED] 428.95

Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address PO BOX 619616

City
DFW Airport

State
TX

Zip Code
75261-9616

Purpose of Disbursement
Outreach & Activism Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25611

Amount of Each Disbursement this Period

[REDACTED] 35.00

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256121

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256211

BB&T Visa

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.256118

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address PO BOX 619616

City
DFW Airport

State
TX

Zip Code
75261-9616

Purpose of Disbursement
Outreach & Activism Expense

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
0	7		1	6		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25611

Amount of Each Disbursement this Period

[REDACTED] 35.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address 208 S Akard St
Suite 2954

City
Dallas

State
TX

Zip Code
75202-0000

Purpose of Disbursement
Telephone & Data 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
0	7		0	4		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

[REDACTED] 196.12

Memo Item

Full Name (Last, First, Middle Initial)

C. Austin Airport

Mailing Address 3600 Presidential Blvd

City
Austin

State
TX

Zip Code
78719-0000

Purpose of Disbursement
Outreach & Activism Expense

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
0	7		1	1		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25612

Amount of Each Disbursement this Period

[REDACTED] 34.41

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256117

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256209

BB&T Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256122

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T Truist Bank

Mailing Address 1717 King St

City
Alexandria

State
VA

Zip Code
22314-0000

Purpose of Disbursement

Bank Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25606

Amount of Each Disbursement this Period

1	1	1	3
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T Truist Visa

Mailing Address PO BOX 580340

City
Charlotte

State
NC

Zip Code
28258-0340

Purpose of Disbursement

Credit Card Fees Expense

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25607

Amount of Each Disbursement this Period

3	9	0	0
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T Truist Visa

Mailing Address PO BOX 580340

City
Charlotte

State
NC

Zip Code
28258-0340

Purpose of Disbursement

Credit Card Payment

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25607

Amount of Each Disbursement this Period

1	0	6	0
---	---	---	---

Memo Item

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

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

2	1	7	1	3
---	---	---	---	---

2	1	7	1	3
---	---	---	---	---

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

Form/Schedule: SB21B

Transaction ID : SB21B.256077

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T Truist Visa

Mailing Address PO BOX 580340

City
Charlotte

State
NC

Zip Code
28258-0340

Purpose of Disbursement
Credit Card Fees Expense

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25607

Amount of Each Disbursement this Period

200.33

Memo Item

Full Name (Last, First, Middle Initial)

B. Better Termite & Pest Control, Inc.

Mailing Address 2647 Duke St

City
Alexandria

State
VA

Zip Code
22314-4593

Purpose of Disbursement
Maintenance, Cleaning & Repairs

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25611

Amount of Each Disbursement this Period

85.05

Memo Item

Full Name (Last, First, Middle Initial)

C. Black Flame Media, LLC

Mailing Address 4516 Burseson Rd

City
Austin

State
TX

Zip Code
78744-0000

Purpose of Disbursement
Fundraising Expense

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25608

Amount of Each Disbursement this Period

438.10

Memo Item

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

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

438.10

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

Form/Schedule: SB21B

Transaction ID : SB21B.256076

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256110

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Bobbys Burgers

Mailing Address 3570 S Las Vegas Blvd

City
Las Vegas

State
NV

Zip Code
89109-0000

Purpose of Disbursement

Meals

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25611

Amount of Each Disbursement this Period

108.19

Memo Item

Full Name (Last, First, Middle Initial)

B. Buchovich, Andrew, , ,

Mailing Address 12594 W Dakota Ave Apt 7-201

City
Lakewood

State
CO

Zip Code
80228-2535

Purpose of Disbursement

Employee Net Pay

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25603

Amount of Each Disbursement this Period

1504.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Buchovich, Andrew, , ,

Mailing Address 12594 W Dakota Ave Apt 7-201

City
Lakewood

State
CO

Zip Code
80228-2535

Purpose of Disbursement

Employee Net Pay

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	7			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25603

Amount of Each Disbursement this Period

1504.15

Memo Item

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

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

3008.30

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

Form/Schedule: SB21B

Transaction ID : SB21B.256112

BB&T Visa

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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

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

Form B: Colorado Department of Revenue
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, Amount of Each Disbursement, and Memo Item.

Form C: Colorado Department of Revenue
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, Amount of Each Disbursement, and 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"/> 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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Cornerstone Solutions Inc

Mailing Address PO Box 270514

City
Houston

State
TX

Zip Code
77277-0000

Purpose of Disbursement

CRM Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25608

Amount of Each Disbursement this Period

1950.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Digitalocean

Mailing Address 101 6th Ave

City
New York

State
NY

Zip Code
10013-0000

Purpose of Disbursement

Software, Hardware & Other IT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

6.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Edwards, Paula, , ,

Mailing Address P.O. Box 55456

City
Washington

State
DC

Zip Code
20006-5456

Purpose of Disbursement

FEC reporting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25603

Amount of Each Disbursement this Period

2000.00

Memo Item

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

3950.00

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.256161

BB&T Visa

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: Extra Space. Includes fields for Mailing Address (2795 E Cottonwood Pkwy), City (Cottonwood Heights), State (UT), Zip Code (84121-0000), Purpose (Historic Preservation Expen), and Disbursement Amount (400.00).

Form B: Federal Express. Includes fields for Mailing Address (942 South Shady Grove Rd), City (Memphis), State (TN), Zip Code (38120-4117), Purpose (Postage & Shipping), and Disbursement Amount (0.91).

Form C: Financial Agent Federal Tax Deposit. Includes fields for Mailing Address (PO Box 970030), City (St. Louis), State (MO), Zip Code (63197-0030), Purpose (Federal Withholding), and Disbursement Amount (825.76).

SUBTOTAL of Disbursements This Page (optional) 825.76
TOTAL This Period (last page this line number only)

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

Form/Schedule: SB21B

Transaction ID : SB21B.256107

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256144

BB&T Visa

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, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis, State MO, Zip Code 63197-0030

Purpose of Disbursement Medicare Company, Candidate Name, Category/Type

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

Date of Disbursement

Date of Disbursement: 07 / 05 / 2024

FEC Identification Number

FEC Identification Number: C, Transaction ID: SB21B.25611, Amount of Each Disbursement this Period: 160.44

Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis, State MO, Zip Code 63197-0030

Purpose of Disbursement Medicare Employee, Candidate Name, Category/Type

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

Date of Disbursement

Date of Disbursement: 07 / 05 / 2024

FEC Identification Number

FEC Identification Number: C, Transaction ID: SB21B.25611, Amount of Each Disbursement this Period: 160.43

Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis, State MO, Zip Code 63197-0030

Purpose of Disbursement Social Security Company, Candidate Name, Category/Type

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

Date of Disbursement

Date of Disbursement: 07 / 05 / 2024

FEC Identification Number

FEC Identification Number: C, Transaction ID: SB21B.25611, Amount of Each Disbursement this Period: 686.01

Memo Item

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

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

Subtotal: 1006.88, Total: 1006.88

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: Financial Agent Federal Tax Deposit. Includes fields for Date of Disbursement (07/05/2024), Mailing Address (PO Box 970030), City (St. Louis), State (MO), Zip Code (63197-0030), Purpose of Disbursement (Social Security Employee), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (866.01).

Form B: Financial Agent Federal Tax Deposit. Includes fields for Date of Disbursement (07/17/2024), Mailing Address (PO Box 970030), City (St. Louis), State (MO), Zip Code (63197-0030), Purpose of Disbursement (Federal Withholding), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (825.76).

Form C: Financial Agent Federal Tax Deposit. Includes fields for Date of Disbursement (07/17/2024), Mailing Address (PO Box 970030), City (St. Louis), State (MO), Zip Code (63197-0030), Purpose of Disbursement (Medicare Company), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (160.44).

SUBTOTAL of Disbursements This Page (optional) 1672.21
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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	4

Mailing Address PO Box 970030

City St. Louis	State MO	Zip Code 63197-0030
-------------------	-------------	------------------------

FEC Identification Number

C

Transaction ID : SB21B.25611
Amount of Each Disbursement this Period

160.45

Memo Item

Purpose of Disbursement

Medicare Employee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	4

Mailing Address PO Box 970030

City St. Louis	State MO	Zip Code 63197-0030
-------------------	-------------	------------------------

FEC Identification Number

C

Transaction ID : SB21B.25615
Amount of Each Disbursement this Period

686.01

Memo Item

Purpose of Disbursement

Social Security Company

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	4

Mailing Address PO Box 970030

City St. Louis	State MO	Zip Code 63197-0030
-------------------	-------------	------------------------

FEC Identification Number

C

Transaction ID : SB21B.25615
Amount of Each Disbursement this Period

686.00

Memo Item

Purpose of Disbursement

Social Security Employee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

1532.46

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 through 30b with checkboxes.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: FP Mailing Solutions. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Disbursement Amount.

Form B: Freedom Calls LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Disbursement Amount.

Form C: Gargon, Canyon, Lee, . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Disbursement Amount.

SUBTOTAL of Disbursements This Page (optional) and 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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Gargon, Canyon, Lee, ,

Mailing Address 184 ADAMS DR

City
SALIX

State
PA

Zip Code
15952-9401

Purpose of Disbursement

Employee Net Pay

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
0	7		1	7		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25603

Amount of Each Disbursement this Period

2379.81

Memo Item

Full Name (Last, First, Middle Initial)

B. GoDaddy.com

Mailing Address 14455 N Hayden Rd
#226

City
Scottsdale

State
AZ

Zip Code
85260-6993

Purpose of Disbursement

Software, Hardware & Other IT

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
0	7		2	3		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

22.17

Memo Item

Full Name (Last, First, Middle Initial)

C. GoDaddy.com

Mailing Address 14455 N Hayden Rd
#226

City
Scottsdale

State
AZ

Zip Code
85260-6993

Purpose of Disbursement

Software, Hardware & Other IT

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
0	7		2	5		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

24.34

Memo Item

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

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

2379.81

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

Form/Schedule: SB21B

Transaction ID : SB21B.256162

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256163

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain View

State
CO

Zip Code
94043-0000

Purpose of Disbursement
Software, Hardware & Other IT

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

21.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Google

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain View

State
CO

Zip Code
94043-0000

Purpose of Disbursement
Software, Hardware & Other IT

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

64.80

Memo Item

Full Name (Last, First, Middle Initial)

C. H-E-B

Mailing Address 646 S Flores St

City
San Antonio

State
TX

Zip Code
78204-0000

Purpose of Disbursement
Outreach & Activism Expense

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

20.44

Memo Item

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

0.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.256164

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256165

BB&T Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256126

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Harrah Hotel

Mailing Address 3475 Las Vegas Blvd S

City
Las Vegas

State
NV

Zip Code
89109-0000

Purpose of Disbursement
Outreach & Activism Expense

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25612

Amount of Each Disbursement this Period

913.85

Memo Item

Full Name (Last, First, Middle Initial)

B. Heise, Michael, , ,

Mailing Address 923 Spruce Street

City
Honey Brook

State
PA

Zip Code
19344-0000

Purpose of Disbursement
Petitioning Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25603

Amount of Each Disbursement this Period

631.20

Memo Item

Full Name (Last, First, Middle Initial)

C. Heise, Michael, , ,

Mailing Address 923 Spruce Street

City
Honey Brook

State
PA

Zip Code
19344-0000

Purpose of Disbursement
Petitioning Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25603

Amount of Each Disbursement this Period

1200.00

Memo Item

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

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

1	8	3	1	.	2	0
---	---	---	---	---	---	---

--	--	--	--	--	--	--

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

Form/Schedule: SB21B

Transaction ID : SB21B.256124

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Heise, Michael, , ,

Mailing Address 923 Spruce Street

City
Honey Brook

State
PA

Zip Code
19344-0000

Purpose of Disbursement

Petitioning Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25603

Amount of Each Disbursement this Period

1200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Heise, Michael, , ,

Mailing Address 923 Spruce Street

City
Honey Brook

State
PA

Zip Code
19344-0000

Purpose of Disbursement

Petitioning Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25603

Amount of Each Disbursement this Period

631.20

Memo Item

Full Name (Last, First, Middle Initial)

C. Heise, Michael, , ,

Mailing Address 923 Spruce Street

City
Honey Brook

State
PA

Zip Code
19344-0000

Purpose of Disbursement

Petitioning Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25604

Amount of Each Disbursement this Period

1200.00

Memo Item

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

3031.20

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. 21b is checked.

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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: Heise, Michael, , , Disbursement details including date (07/29/2024), amount (1200.00), and category (C).

Form B: Heise, Michael, , , Disbursement details including date (07/29/2024), amount (1200.00), and category (C).

Form C: Hreha, Andrew, , , Disbursement details including date (07/05/2024), amount (1227.19), and category (C).

SUBTOTAL of Disbursements This Page (optional) 3627.19
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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Hreha, Andrew, , ,

Mailing Address 1814 Acheson Ave.
Box 284

City
N. Apollo

State
PA

Zip Code
15673-1015

Purpose of Disbursement

Employee Net Pay

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
0	7			1	7			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25604

Amount of Each Disbursement this Period

1227.19

Memo Item

Full Name (Last, First, Middle Initial)

B. Hudson, Matthew, , ,

Mailing Address 120 ASH ST

City
GARDNER

State
MA

Zip Code
01440-2130

Purpose of Disbursement

Web IT 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
0	7			0	2			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25621

Amount of Each Disbursement this Period

985.28

Memo Item

Full Name (Last, First, Middle Initial)

C. Hudson, Matthew, , ,

Mailing Address 120 ASH ST

City
GARDNER

State
MA

Zip Code
01440-2130

Purpose of Disbursement

Web and IT 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
0	7			1	2			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25604

Amount of Each Disbursement this Period

2100.00

Memo Item

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

4312.47

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. 21b is checked.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: Hudson, Matthew. Mailing Address: 120 ASH ST, GARDNER, MA 01440-2130. Purpose: Web and IT Consulting. Amount: 2100.00.

Form B: Humana. Mailing Address: 4201 W. Parmer Lane, Austin, TX 78727-0000. Purpose: General Fundraising Expense. Amount: 150.00.

Form C: In Miles Press. Mailing Address: 14 Sword Street, Auburn, MA 01501-0000. Purpose: Ballot Access Fundraising Exp. Amount: 1612.00.

SUBTOTAL of Disbursements This Page (optional) 2100.00
TOTAL This Period (last page this line number only)

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

Form/Schedule: SB21B

Transaction ID : SB21B.256104

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256065

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. In Miles Press

Mailing Address 14 Sword Street

City
Auburn

State
MA

Zip Code
01501-0000

Purpose of Disbursement
Ballot Access Fundraising Exp

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2024

FEC Identification Number

C

Transaction ID : SB21B.25606

Amount of Each Disbursement this Period

840.03

Memo Item

Full Name (Last, First, Middle Initial)

B. In Miles Press

Mailing Address 14 Sword Street

City
Auburn

State
MA

Zip Code
01501-0000

Purpose of Disbursement
Ballot Access Fundraising Exp

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2024

FEC Identification Number

C

Transaction ID : SB21B.25606

Amount of Each Disbursement this Period

714.07

Memo Item

Full Name (Last, First, Middle Initial)

C. Instacart

Mailing Address 50 Beale St
#600

City
San Francisco

State
CA

Zip Code
94105-0000

Purpose of Disbursement
Outreach & Activism Expense

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2024

FEC Identification Number

C

Transaction ID : SB21B.25612

Amount of Each Disbursement this Period

11.71

Memo Item

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

0.00

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.256066

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256067

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256128

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Instacart

Mailing Address 50 Beale St
#600

City
San Francisco

State
CA

Zip Code
94105-0000

Purpose of Disbursement
Outreach & Activism Expense

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
0	7		1	0		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25612

Amount of Each Disbursement this Period

[REDACTED] 64.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Instacart

Mailing Address 50 Beale St
#600

City
San Francisco

State
CA

Zip Code
94105-0000

Purpose of Disbursement
Outreach & Activism Expense

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
0	7		1	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25612

Amount of Each Disbursement this Period

[REDACTED] 51.67

Memo Item

Full Name (Last, First, Middle Initial)

C. Intuit Software

Mailing Address 5601 Headquarters Dr

City
Plano

State
TX

Zip Code
75024-0000

Purpose of Disbursement
Software, Hardware & Other IT

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
0	7		2	3		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25612

Amount of Each Disbursement this Period

[REDACTED] 90.00

Memo Item

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

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

[REDACTED] 90.00

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256129

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256127

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Joinery

Mailing Address 500 W. Woodard St.

City
Denison

State
TX

Zip Code
75020-0000

Purpose of Disbursement
Software, Hardware & Other IT

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25615

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Kennedy, Hannah, , ,

Mailing Address 3552 RUTH ST

City
HOUSTON

State
TX

Zip Code
77004-5516

Purpose of Disbursement
Employee Net Pay

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25604

Amount of Each Disbursement this Period

[REDACTED] 2832.16

Memo Item

Full Name (Last, First, Middle Initial)

C. Kennedy, Hannah, , ,

Mailing Address 3552 RUTH ST

City
HOUSTON

State
TX

Zip Code
77004-5516

Purpose of Disbursement
Employee Net Pay

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25604

Amount of Each Disbursement this Period

[REDACTED] 2832.16

Memo Item

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

[REDACTED] 5664.32

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256157

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Kerschen, Arthur, , ,

Mailing Address 2026 S Montezuma Ave

City
Tucson

State
AZ

Zip Code
85711-0000

Purpose of Disbursement

Petitioning Fee

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25605

Amount of Each Disbursement this Period

4070.00

Memo Item

Full Name (Last, First, Middle Initial)

B. McWilliams, Brian, James, ,

Mailing Address 13821 SHOUP AVE

City
HAWTHORNE

State
CA

Zip Code
90250-6558

Purpose of Disbursement

Fundraising Consulting

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25622

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Microsoft

Mailing Address One Microsoft Way

City
Redmond

State
WA

Zip Code
98052-6399

Purpose of Disbursement

Software, Hardware & Other IT

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	4			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

299.38

Memo Item

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

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

5570.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.256167

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Nextiva Voip Service

Mailing Address 9451 E Via de Ventura

City
Scottsdale

State
AZ

Zip Code
85256-0000

Purpose of Disbursement
Telephone & Data Services

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	2	4

FEC Identification Number

C []

Transaction ID : SB21B.25621

Amount of Each Disbursement this Period

[] 65.40 []

Memo Item

Full Name (Last, First, Middle Initial)

B. Octillo Law

Mailing Address 420 Main St
Ste 1110

City
Buffalo

State
NY

Zip Code
14202-0000

Purpose of Disbursement
Cyber Security & IT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	2	4

FEC Identification Number

C []

Transaction ID : SB21B.25608

Amount of Each Disbursement this Period

[] 1560.00 []

Memo Item

Full Name (Last, First, Middle Initial)

C. PA Dept. of Revenue

Mailing Address PO Box 281101

City
Harrisburg

State
PA

Zip Code
17128-1101

Purpose of Disbursement
PA Withholding

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	2	4

FEC Identification Number

C []

Transaction ID : SB21B.25621

Amount of Each Disbursement this Period

[] 148.85 []

Memo Item

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

[] 1708.85 []

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

[] [] [] [] [] [] [] [] [] []

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

Form/Schedule: SB21B

Transaction ID : SB21B.256210

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PA Dept. of Revenue

Mailing Address PO Box 281101

City
Harrisburg

State
PA

Zip Code
17128-1101

Purpose of Disbursement

PA Withholding

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25621

Amount of Each Disbursement this Period

[REDACTED] 148.85

Memo Item

Full Name (Last, First, Middle Initial)

B. PayChex Flex

Mailing Address 4300 Kittredge St Suite 100

City
Denver

State
CO

Zip Code
80239-0000

Purpose of Disbursement

Payroll Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25614

Amount of Each Disbursement this Period

[REDACTED] 791.80

Memo Item

Full Name (Last, First, Middle Initial)

C. PayChex Flex

Mailing Address 4300 Kittredge St Suite 100

City
Denver

State
CO

Zip Code
80239-0000

Purpose of Disbursement

Payroll Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25614

Amount of Each Disbursement this Period

[REDACTED] 761.80

Memo Item

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

[REDACTED] 1702.45

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San Jose

State
CA

Zip Code
95131-0000

Purpose of Disbursement

Merchandise Expense

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25617

Amount of Each Disbursement this Period

[REDACTED] 325.80

Memo Item

Full Name (Last, First, Middle Initial)

B. Pirate Ship Postage

Mailing Address PO Box 9149

City
Jackson

State
WY

Zip Code
83002-0000

Purpose of Disbursement

Postage & Shipping

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25614

Amount of Each Disbursement this Period

[REDACTED] 4.02

Memo Item

Full Name (Last, First, Middle Initial)

C. Pirate Ship Postage

Mailing Address PO Box 9149

City
Jackson

State
WY

Zip Code
83002-0000

Purpose of Disbursement

Postage & Shipping

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25614

Amount of Each Disbursement this Period

[REDACTED] 4.36

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.256170

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256146

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256145

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address 300 Fifth Avenue

City
Pittsburgh

State
OR

Zip Code
15222-0000

Purpose of Disbursement

Bank Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	2	4		

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.25606

Amount of Each Disbursement this Period

[Redacted] 120.58

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address 300 Fifth Avenue

City
Pittsburgh

State
OR

Zip Code
15222-0000

Purpose of Disbursement

Bank Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	4		

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.25607

Amount of Each Disbursement this Period

[Redacted] 139.66

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bus Options Visa

Mailing Address 249 Fifth Ave

City
Pittsburgh

State
PA

Zip Code
15222-0000

Purpose of Disbursement

Credit Card Payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	2	4		

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.25608

Amount of Each Disbursement this Period

[Redacted] 4683.11

Memo Item

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

[Redacted] 4943.35

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PNC Bus Options Visa

Mailing Address 249 Fifth Ave

City
Pittsburgh

State
PA

Zip Code
15222-0000

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

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25608

Amount of Each Disbursement this Period

4683.11

Memo Item

Full Name (Last, First, Middle Initial)

B. Poole, Iris, , ,

Mailing Address 604 Cloud Ct

City
Round Rock

State
TX

Zip Code
78681-0000

Purpose of Disbursement

Employee Net Pay

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
0	7		0	5		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25605

Amount of Each Disbursement this Period

924.24

Memo Item

Full Name (Last, First, Middle Initial)

C. Poole, Iris, , ,

Mailing Address 604 Cloud Ct

City
Round Rock

State
TX

Zip Code
78681-0000

Purpose of Disbursement

Employee Net Pay

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
0	7		1	7		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25605

Amount of Each Disbursement this Period

924.24

Memo Item

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

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

6531.59

**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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Postmaster - USPS HQ

Mailing Address 475 L'Enfant Plaza SW

City
Washington

State
DC

Zip Code
20260-0010

Purpose of Disbursement

Postage & Shipping

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	9		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25621

Amount of Each Disbursement this Period

3470.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Postmaster - USPS HQ

Mailing Address 475 L'Enfant Plaza SW

City
Washington

State
DC

Zip Code
20260-0010

Purpose of Disbursement

Postage & Shipping

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	0		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25621

Amount of Each Disbursement this Period

1675.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	1		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25605

Amount of Each Disbursement this Period

37.42

Memo Item

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

5182.42

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	2	4		

FEC Identification Number

C []

Transaction ID : SB21B.25609

Amount of Each Disbursement this Period

[] 35.94

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	2	4		

FEC Identification Number

C []

Transaction ID : SB21B.25609

Amount of Each Disbursement this Period

[] 26.23

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	2	4		

FEC Identification Number

C []

Transaction ID : SB21B.25609

Amount of Each Disbursement this Period

[] 16.34

Memo Item

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

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

[] 78.51

[]

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement Fundraising Expense
Candidate Name
Category/Type

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

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2024

FEC Identification Number

C
Transaction ID : SB21B.25609
Amount of Each Disbursement this Period
16.53

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement Fundraising Expense
Candidate Name
Category/Type

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

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2024

FEC Identification Number

C
Transaction ID : SB21B.25609
Amount of Each Disbursement this Period
20.76

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement Fundraising Expense
Candidate Name
Category/Type

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

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2024

FEC Identification Number

C
Transaction ID : SB21B.25609
Amount of Each Disbursement this Period
9.03

Memo Item

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

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

46.32

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25609

Amount of Each Disbursement this Period

[REDACTED] 8.24

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25609

Amount of Each Disbursement this Period

[REDACTED] 96.32

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25609

Amount of Each Disbursement this Period

[REDACTED] 18.15

Memo Item

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

[REDACTED] 122.71

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25610

Amount of Each Disbursement this Period

[REDACTED] 21.47

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25610

Amount of Each Disbursement this Period

[REDACTED] 20.20

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Fundraising Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	1			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25610

Amount of Each Disbursement this Period

[REDACTED] 20.63

Memo Item

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

[REDACTED] 62.30

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25619

Amount of Each Disbursement this Period

15.53

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25619

Amount of Each Disbursement this Period

20.76

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25619

Amount of Each Disbursement this Period

15.27

Memo Item

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

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

0.00

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

Form/Schedule: SB21B

Transaction ID : SB21B.256194

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256195

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256196

PNC Visa

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: Print Connection. 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, Amount of Each Disbursement, and Memo Item checkbox.

Form B: Print Connection. 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, Amount of Each Disbursement, and Memo Item checkbox.

Form C: Print Connection. 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, Amount of Each Disbursement, and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only) summary rows.

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

Form/Schedule: SB21B

Transaction ID : SB21B.256197

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256198

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256199

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

[REDACTED] 14.99

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

[REDACTED] 22.70

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

[REDACTED] 56.10

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256200

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256201

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256202

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

16.51

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

32.17

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

12.86

Memo Item

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

0.00

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.256203

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256204

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256205

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

[REDACTED] 22.83

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25620

Amount of Each Disbursement this Period

[REDACTED] 30.96

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25615

Amount of Each Disbursement this Period

[REDACTED] 40.16

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256206

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256207

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256191

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25619

Amount of Each Disbursement this Period

28.84

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25619

Amount of Each Disbursement this Period

75.93

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.25619

Amount of Each Disbursement this Period

16.36

Memo Item

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

0.00

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.256192

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256193

PNC Visa

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.256188

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

[REDACTED] 33.64

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

[REDACTED] 21.96

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

[REDACTED] 15.14

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256189

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256190

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256185

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	1				2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

41.91

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	1				2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

86.91

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	2				2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

16.72

Memo Item

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

0.00

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.256186

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256187

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256181

PNC Visa

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)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	2	4		

FEC Identification Number

C []
Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

[] 23.81

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	2	4		

FEC Identification Number

C []
Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

[] 16.69

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	2	4		

FEC Identification Number

C []
Transaction ID : SB21B.25618

Amount of Each Disbursement this Period

[] 20.87

Memo Item

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

[] 0.00

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

[]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256182

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256183

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256184

PNC Visa

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: Print Connection. 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, Amount of Each Disbursement, and Memo Item checkbox.

Form B: Print Connection. 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, Amount of Each Disbursement, and Memo Item checkbox.

Form C: Print Connection. 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, Amount of Each Disbursement, and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only) summary rows.

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

Form/Schedule: SB21B

Transaction ID : SB21B.256178

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256179

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256180

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	5		2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25617

Amount of Each Disbursement this Period

[REDACTED] 29.44

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	5		2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25617

Amount of Each Disbursement this Period

[REDACTED] 52.54

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	5		2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25617

Amount of Each Disbursement this Period

[REDACTED] 20.71

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256174

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256175

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256176

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25617

Amount of Each Disbursement this Period

135.21

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25617

Amount of Each Disbursement this Period

13.14

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.2562t

Amount of Each Disbursement this Period

21.47

Memo Item

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

0.00

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.256177

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256173

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256208

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	8		2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25617

Amount of Each Disbursement this Period

[REDACTED] 48.09

Memo Item

Full Name (Last, First, Middle Initial)

B. Print Connection

Mailing Address 11025 Westlake Dr

City
Charlotte

State
NC

Zip Code
28273-3782

Purpose of Disbursement

Merchandise Expense

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	0		2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25617

Amount of Each Disbursement this Period

[REDACTED] 52.46

Memo Item

Full Name (Last, First, Middle Initial)

C. Redpath, William, B, Mr,

Mailing Address 1303 WESTLEY LN

City
WEST DUNDEE

State
IL

Zip Code
60118-3545

Purpose of Disbursement

Petitioning Fee

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	2		2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25605

Amount of Each Disbursement this Period

[REDACTED] 4040.00

Memo Item

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

[REDACTED] 4040.00

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256172

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256171

PNC Visa

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: Disbursement for Redpath, William, B, Mr. Includes fields for name, address, date (07/02/2024), amount (723.46), and category (C).

Form B: Disbursement for Simplifi Tx Us. Includes fields for name, address, date (07/09/2024), amount (3072.41), and category (C).

Form C: Disbursement for Stein, Alex, , ,. Includes fields for name, address, date (07/19/2024), amount (1802.12), and category (C).

SUBTOTAL of Disbursements This Page (optional) 2525.58
TOTAL This Period (last page this line number only)

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

Form/Schedule: SB21B

Transaction ID : SB21B.256105

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Stripe

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	2	4

Mailing Address 354 Oyster Point Blvd

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25610
Amount of Each Disbursement this Period

[REDACTED] 3400.34

Memo Item

City South San Francisco State CA Zip Code 94080-0000

Purpose of Disbursement
Fundraising Expense - Merchant Fees

[REDACTED]
Category/
Type

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

B. Texas Hometown Solutions

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	4

Mailing Address PO Box 518

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25622
Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

City Leander State TX Zip Code 78646-0000

Purpose of Disbursement
Ballot Access

[REDACTED]
Category/
Type

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

C. Trimark Corp.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	4

Mailing Address 6231 Leesburg Pike #100

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25607
Amount of Each Disbursement this Period

[REDACTED] 210.00

Memo Item

City Falls Church State VA Zip Code 22044-0000

Purpose of Disbursement
Cleaning

[REDACTED]
Category/
Type

Candidate Name

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

State: District:

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

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

[REDACTED] 4610.34

[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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

Form A: Uber.com. Includes fields for Mailing Address (1455 Market St, FI 4), City (San Francisco), State (CA), Zip Code (94103-0000), Purpose of Disbursement (Outreach & Activism Expense), and Amount of Each Disbursement (2.31).

Form B: Uber.com. Includes fields for Mailing Address (1455 Market St, FI 4), City (San Francisco), State (CA), Zip Code (94103-0000), Purpose of Disbursement (Outreach & Activism Expense), and Amount of Each Disbursement (26.45).

Form C: Uber.com. Includes fields for Mailing Address (1455 Market St, FI 4), City (San Francisco), State (CA), Zip Code (94103-0000), Purpose of Disbursement (Outreach & Activism Expense), and Amount of Each Disbursement (29.56).

SUBTOTAL of Disbursements This Page (optional) 0.00
TOTAL This Period (last page this line number only)

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

Form/Schedule: SB21B

Transaction ID : SB21B.256133

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256134

BB&T Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256135

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Uber.com

Mailing Address 1455 Market St
FI 4

City
San Francisco

State
CA

Zip Code
94103-0000

Purpose of Disbursement
Outreach & Activism Expense

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
0	7		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25613

Amount of Each Disbursement this Period

27.78

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber.com

Mailing Address 1455 Market St
FI 4

City
San Francisco

State
CA

Zip Code
94103-0000

Purpose of Disbursement
Outreach & Activism Expense

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
0	7		1	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25613

Amount of Each Disbursement this Period

3.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber.com

Mailing Address 1455 Market St
FI 4

City
San Francisco

State
CA

Zip Code
94103-0000

Purpose of Disbursement
Outreach & Activism Expense

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
0	7		1	6		2	0	2	4

FEC Identification Number

C

Transaction ID : SB21B.25613

Amount of Each Disbursement this Period

9.53

Memo Item

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

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

0.00

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

Form/Schedule: SB21B

Transaction ID : SB21B.256132

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256130

BB&T Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256131

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. US Global Mail

Mailing Address 1321 Upland Dr

City
Houston

State
TX

Zip Code
77043-0000

Purpose of Disbursement

Postage & Shipping

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	3				2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25614

Amount of Each Disbursement this Period

[REDACTED] 5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. US Global Mail

Mailing Address 1321 Upland Dr

City
Houston

State
TX

Zip Code
77043-0000

Purpose of Disbursement

Postage & Shipping

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	5				2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25614

Amount of Each Disbursement this Period

[REDACTED] 34.99

Memo Item

Full Name (Last, First, Middle Initial)

C. Vanguard

Mailing Address PO Box 28067

City
New York

State
NY

Zip Code
10087-8067

Purpose of Disbursement

LP 401K Contributions and Match

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	5				2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25614

Amount of Each Disbursement this Period

[REDACTED] 455.53

Memo Item

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

[REDACTED] 455.53

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256147

PNC Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256148

PNC Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Vanguard

Mailing Address PO Box 28067

City
New York

State
NY

Zip Code
10087-8067

Purpose of Disbursement
LP 401K Contributions and Match

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25610

Amount of Each Disbursement this Period

[REDACTED] 455.53

Memo Item

Full Name (Last, First, Middle Initial)

B. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
Richmond

State
VA

Zip Code
23261-6644

Purpose of Disbursement
Sales Tax

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25615

Amount of Each Disbursement this Period

[REDACTED] 3.17

Memo Item

Full Name (Last, First, Middle Initial)

C. Voter Gravity Va

Mailing Address 121 E Main St

City
Purcellville

State
VA

Zip Code
20132-0000

Purpose of Disbursement
Campaign Candidate Support

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.25607

Amount of Each Disbursement this Period

[REDACTED] 3000.00

Memo Item

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

[REDACTED] 458.70

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

[REDACTED]

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

Form/Schedule: SB21B

Transaction ID : SB21B.256071

BB&T Visa

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)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. X Corp

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	4

Mailing Address 1355 Market St

City
San Francisco

State
CA

Zip Code
94103-0000

FEC Identification Number

C

Transaction ID : SB21B.25613

Amount of Each Disbursement this Period

8.00

Purpose of Disbursement

Outreach & Activism Expense

Category/
Type

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:

Memo Item

Full Name (Last, First, Middle Initial)

B. Zoho Corp

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Mailing Address 4141 Hacienda Dr

City
Pleasanton

State
CA

Zip Code
94588-0000

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

613.00

Purpose of Disbursement

Software, Hardware & Other IT

Category/
Type

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:

Memo Item

Full Name (Last, First, Middle Initial)

C. Zoho Corp

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	2	4

Mailing Address 4141 Hacienda Dr

City
Pleasanton

State
CA

Zip Code
94588-0000

FEC Identification Number

C

Transaction ID : SB21B.25616

Amount of Each Disbursement this Period

42.10

Purpose of Disbursement

Software, Hardware & Other IT

Category/
Type

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:

Memo Item

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

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

0.00

92396.73

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

Form/Schedule: SB21B

Transaction ID : SB21B.256137

BB&T Visa

Form/Schedule: SB21B

Transaction ID: SB21B.256169

PNC Visa

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

Form/Schedule: SB21B

Transaction ID : SB21B.256168

PNC Visa

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

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. LPAK - LP Alaska

Mailing Address 200 W 34th Ave
#543

City Anchorage State AK Zip Code 99503-0000

Purpose of Disbursement

Affiliate

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
07 / 05 / 2024

FEC Identification Number

C []

Transaction ID : SB29.256060

Amount of Each Disbursement this Period

[] 37.98

Memo Item

Full Name (Last, First, Middle Initial)

B. LPAL - LP Alabama

Mailing Address PO Box 2375

City Madison State AL Zip Code 33758-0000

Purpose of Disbursement

Affiliate

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
07 / 11 / 2024

FEC Identification Number

C []

Transaction ID : SB29.256061

Amount of Each Disbursement this Period

[] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LPCA - LP California

Mailing Address 428 J Street
Ste 400

City Sacramento State CA Zip Code 95814-3361

Purpose of Disbursement

Affiliate

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
07 / 05 / 2024

FEC Identification Number

C []

Transaction ID : SB29.256062

Amount of Each Disbursement this Period

[] 119.63

Memo Item

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

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

[] 5157.61

[] 5157.61

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 256 OF 259
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aiken, David, , ,			Nature of Debt (Purpose): CiviCRM and Campaign Support
Mailing Address 1240 N Ogden St #4			
City Denver	State CO	Zip Code 80218-0000	

Outstanding Balance Beginning This Period <input type="text" value="1971.25"/>	Transaction ID : SD10.253399	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1971.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aiken, David, , ,			Nature of Debt (Purpose): CiviCRM and Campaign Support
Mailing Address 1240 N Ogden St #4			
City Denver	State CO	Zip Code 80218-0000	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.256226	
Amount Incurred This Period <input type="text" value="1971.25"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1971.25"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hall, Oliver, , ,			Nature of Debt (Purpose): Legal Retainer
Mailing Address 1835 16th St NW #5			
City Washington	State DC	Zip Code 20009-0000	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.256227	
Amount Incurred This Period <input type="text" value="4800.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4800.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="6771.25"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 257 OF 259
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton			Nature of Debt (Purpose): Convention Site Charges/Lodging/Food (Estimate)
Mailing Address 1919 Connecticut Ave NW			
City Washington	State DC	Zip Code 20009-0000	

Outstanding Balance Beginning This Period 290000.00	Transaction ID : SD10.250169	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 290000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hudson, Matthew, , ,			Nature of Debt (Purpose): Website Consultant
Mailing Address 120 ASH ST			
City GARDNER	State MA	Zip Code 01440-2130	

Outstanding Balance Beginning This Period 985.28	Transaction ID : SD10.253400	
Amount Incurred This Period 0.00	Payment This Period 985.28	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PA Dept. of Revenue			Nature of Debt (Purpose): Taxes Due
Mailing Address PO Box 281101			
City Harrisburg	State PA	Zip Code 17128-1101	

Outstanding Balance Beginning This Period 360.55	Transaction ID : SD10.253403	
Amount Incurred This Period 0.00	Payment This Period 297.70	Outstanding Balance at Close of This Period 62.85

1) SUBTOTALS This Period This Page (optional)..... ▶	290062.85
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

Form/Schedule: SD10

Transaction ID : SD10.250169

The final bill for hotel expenses has not been received. The LNC is currently negotiating the final costs.

Form/Schedule:

Transaction ID:

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DEBTS AND OBLIGATIONS

Excluding Loans

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Texas Hometown Solutions			Nature of Debt (Purpose): Canvassing Services
Mailing Address PO Box 518			
City Leander	State TX	Zip Code 78646-0000	

Outstanding Balance Beginning This Period		Transaction ID : SD10.253401	
1000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	1000.00	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	296834.10
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	296834.10