



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

*Madam President PAC*

Report Covering the Period:

From:

07 01 2022

To:

09 30 2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2022		2402
(b) Cash on Hand at Beginning of Reporting Period	886	
(c) Total Receipts (from Line 19)	83133	90549
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	84019	92951
7. Total Disbursements (from Line 31)	125327	134259
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	-41308	-41308
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	42149	<i>\$ 8,41 true balance</i>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	



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

**For further information contact:**

Federal Election Commission  
1050 First Street, N.E.  
Washington, DC 20463

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

NON-FEDERAL CAMPAIGN FINANCING

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

*Madam President*

Report Covering the Period: From: **07 01 2022** To: **09 30 2022**

**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).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

73412  
  
73412

80828  
  
80828

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

73412

80828

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

9721

9721

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b)).....

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

83133

90549

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

83133

90549

NON-FEDERAL CONTRIBUTION

**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 .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....	7,345.7	8,238.9
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7,345.7	8,238.9
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	97.21	97.21
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	97.21	97.21
29. Other Disbursements (Including Non-Federal Donations).....	421.49	421.49
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1,253.27	1,342.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1,253.27	1,342.59

NON-FEDERAL DISBURSEMENTS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	734.12	808.28
34. Total Contribution Refunds (from Line 28(d)) .....	97.21	97.21
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	636.91	711.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	734.57	823.89
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	97.21	97.21
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	637.36	726.68

NONNUN (10) NUN (10) 000000000000



**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 2 OF 5

<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)

*Madam President PAC*

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

*Rosemarie Boyd*

Mailing Address

*2008 ST ST*

City

*Fort Smith*

State

*AR*

Zip Code

*72901*

FEC ID number of contributing federal political committee.

*C*

Name of Employer (for Individual)

*True Grit Law Firm*

Occupation (for Individual)

*Attorney*

Receipt For:

Primary  General

Other (specify) ▼

*Admin*

Aggregate Year-to-Date ▼

*653.85*

Date of Receipt

*07 07 2022*

Amount of Each Receipt this Period

*110*

Memo Item

*in-kind stamps to mail FEC report*

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

*Same as above*

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

*07 14 2022*

Amount of Each Receipt this Period

*111.83*

Memo Item

*in-kind TRUE GRIT CHENEY yard signs*

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

*Same as above*

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

*09 01 2022*

Amount of Each Receipt this Period

*245.90*

Memo Item

*in-kind TRUE GRIT CHENEY Facebook ads*

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

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

*358.83*

NON PROFIT ORGANIZATION

**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 3 OF 5

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

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NAME OF COMMITTEE (In Full)

*Madam President PAC*

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

A. *Mosemarie Boyd*

Mailing Address

*2008 S T ST*

City

*Fort Smith*

State

*AR*

Zip Code

*72901*

FEC ID number of contributing federal political committee.

*C*

Name of Employer (for Individual)

*True Grit Law Firm*

Occupation (for Individual)

*Attorney*

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

*653.85*

Date of Receipt

*07 23 2022*

Amount of Each Receipt this Period

*5.00*

Memo Item *in-kind*  
*Cheyenne Frontier Days event ticket*

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

B. *Same as above*

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

*07 23 2022*

Amount of Each Receipt this Period

*2600*

Memo Item *in-kind*  
*Cheyenne Frontier Days stadium seating ticket*

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

C. *Same as above*

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

*07 23 2022*

Amount of Each Receipt this Period

*370*

Memo Item *in-kind*  
*zip ties for signs*

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

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

*3470*

NONNATIONAL CONTRIBUTION



**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 4 OF 5

<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)

*Madam President PAC*

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

A. *Mosemarie Boyd*

Mailing Address

*2008 S T St*

City

*Fort Smith*

State

*AR*

Zip Code

*72901*

FEC ID number of contributing federal political committee.

*C*

Name of Employer (for Individual)

*True Grit Law Firm*

Occupation (for Individual)

*Attorney*

Receipt For

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

*653.85*

Date of Receipt

*07 23 2022*

Amount of Each Receipt this Period

*30.00*

Memo Item *in-kind use of t-posts 6 @ \$5.00 each (used)*

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

B. *Same as above*

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

*07 23 2022*

Amount of Each Receipt this Period

*125.00*

Memo Item *mileage for travel 200 miles related to this project*

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

C. *Same as above*

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) *Admin*

Aggregate Year-to-Date ▼

Date of Receipt

*09 01 2022*

Amount of Each Receipt this Period

*1.16*

Memo Item *in-kind website email*

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

*156.06*

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: PAGE 5 OF 5

(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)

*Madam President PAC*

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

A. *Vickie Boyd*

Mailing Address

*7624 Southcliff Dr.*

City

*Fair Oaks*

State

*CA*

Zip Code

*95628*

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 ▼

*57.22*

Date of Receipt

*08 / 03 / 2022*

Amount of Each Receipt this Period

*154.43*

Memo Item *in-kind purchase of signs from graphic services*

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

B.

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

Amount of Each Receipt this Period

Memo Item

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

C.

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

Amount of Each Receipt this Period

Memo Item

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

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

*154.43*

NON-FEDERAL CAMPAIGN FINANCE

**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 1 OF 1
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input checked="" 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)  
*Madam President PAC*

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
*Graphic Services*

Mailing Address  
*319 Rogers Ave*

City *Fort Smith* State *AR* Zip Code *72901*

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 ▼

Date of Receipt  
*08/11/2022*

Amount of Each Receipt this Period  
*97.21*

Memo Item *in-kind refund due to errors and delays (refunded to Vickie Boyd)*

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... *97.21*

**TOTAL** This Period (last page this line number only)..... *97.21*

NONPROFIT ORGANIZATION

**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)						PAGE / OF 5
	<input checked="" type="checkbox"/> 21b 28a	<input type="checkbox"/> 22 28b	<input type="checkbox"/> 23 28c	<input type="checkbox"/> 26 29	<input type="checkbox"/> 27 30b		

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)  
*Madam President PAC*

A. Full Name (Last, First, Middle Initial) <i>Rosemarie Boyd</i>			Date of Disbursement <i>07 01 2022</i>		
Mailing Address <i>2008 S T ST</i>			FEC Identification Number <i>C</i>		
City <i>Fort Smith</i>	State <i>AR</i>	Zip Code <i>72901</i>			
Purpose of Disbursement <i>Admin- Office space, etc.</i>			Amount of Each Disbursement this Period <i>1000</i>		
Candidate Name			Category/Type <i>001</i>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) <i>Admin</i>		Memo Item <i>de minimis office space, supplies, equip</i>		
State:	District:				

B. Full Name (Last, First, Middle Initial) <i>Same as above</i>			Date of Disbursement <i>08 01 2022</i>		
Mailing Address			FEC Identification Number <i>C</i>		
City	State	Zip Code			
Purpose of Disbursement			Amount of Each Disbursement this Period <i>1000</i>		
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"/> Other (specify)		Memo Item <i>Same as above</i>		
State:	District:				

C. Full Name (Last, First, Middle Initial) <i>Same as above</i>			Date of Disbursement <i>09 01 2022</i>		
Mailing Address			FEC Identification Number <i>C</i>		
City	State	Zip Code			
Purpose of Disbursement			Amount of Each Disbursement this Period <i>1000</i>		
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"/> Other (specify)		Memo Item <i>Same as above</i>		
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	<i>3000</i>
TOTAL This Period (last page this line number only).....	

NON-FEDERAL CAMPAIGN FINANCIAL DISBURSEMENT

**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)  
*Madam President PAC*

**A.** Full Name (Last, First, Middle Initial)  
*Rosemarie Boyd*

Mailing Address  
*2008 S T ST*

City *Fort Smith* State *AR* Zip Code *72901*

Purpose of Disbursement  
*Admin - Office, etc*

Candidate Name  
*N/A*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
*07 07 2022*

FEC Identification Number  
*C*

Amount of Each Disbursement this Period  
*1.10*

Memo Item *in-kind postage*

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

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Purpose of Disbursement  
*yard signs*

Candidate Name  
*Liz Cheney*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: *WY* District: \_\_\_\_\_

Date of Disbursement  
*07 14 2022*

FEC Identification Number  
*C*

Amount of Each Disbursement this Period  
*111.83*

Memo Item *in-kind*

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

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Purpose of Disbursement  
*Facebook ads*

Candidate Name  
*Liz Cheney*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: *WY* District: \_\_\_\_\_

Date of Disbursement  
*09 01 2022*

FEC Identification Number  
*C*

Amount of Each Disbursement this Period  
*245.90*

Memo Item *in-kind*

**SUBTOTAL** of Disbursements This Page (optional).....▶ *358.83*

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

NON-FEDERAL CAMPAIGN FINANCIAL REPORT

**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)						PAGE <u>3</u> OF <u>5</u>		
	<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

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NAME OF COMMITTEE (In Full)  
Madam President PAC

**A.** Full Name (Last, First, Middle Initial) Mosemarie Boyd Date of Disbursement 07/23/2022

Mailing Address 2008 S T ST

City Fort Smith State AR Zip Code 72901

Purpose of Disbursement Cheyenne Frontier Days Ticket Category/Type 007

Candidate Name Liz Cheney

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

State: WY District: At-Large

FEC Identification Number C

Amount of Each Disbursement this Period 5.00

Memo Item in-kind

**B.** Full Name (Last, First, Middle Initial) Same as above Date of Disbursement 07/23/2022

Mailing Address

City State Zip Code

Purpose of Disbursement Stadium Seating Ticket Category/Type 007

Candidate Name Liz Cheney

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

State: WY District:

FEC Identification Number C

Amount of Each Disbursement this Period 26.00

Memo Item

**C.** Full Name (Last, First, Middle Initial) Same as above Date of Disbursement 07/23/2022

Mailing Address

City State Zip Code

Purpose of Disbursement Zip ties for signs Category/Type 004

Candidate Name Liz Cheney

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

State: WY District: At Large

FEC Identification Number C

Amount of Each Disbursement this Period 3.70

Memo Item in-kind

SUBTOTAL of Disbursements This Page (optional)..... 34.70

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

NON-FEDERAL CAMPAIGN DISBURSEMENTS

**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)

PAGE 4 OF 5

<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

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)  
*Madam President PAC*

**A.** Full Name (Last, First, Middle Initial) *Rosemarie Boyd* Date of Disbursement *07/23/2022*

Mailing Address *2008 S T ST*

City *Fort Smith* State *AR* Zip Code *72901* FEC Identification Number *C*

Purpose of Disbursement *Fenceposts (+-posts) for signs* Category/Type *004*

Candidate Name *Liz Cheney* Amount of Each Disbursement this Period *30.00*

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) *in-kind*

State: *WY* District: *A+Large*

**B.** Full Name (Last, First, Middle Initial) *Same as above* Date of Disbursement *07/23/2022*

Mailing Address

City State Zip Code

Purpose of Disbursement *Travel - mileage, use of car* Category/Type *002*

Candidate Name *Liz Cheney* Amount of Each Disbursement this Period *125.00*

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) *in-kind*

State: *WY* District:

**C.** Full Name (Last, First, Middle Initial) *Same as above* Date of Disbursement *09/01/2022*

Mailing Address

City State Zip Code

Purpose of Disbursement *Admin - website email* Category/Type *001*

Candidate Name

Amount of Each Disbursement this Period *1.16*

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) *in-kind*

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... *156.16*

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

NONNATIONAL ORGANIZATION

**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)						PAGE <u>5</u> OF <u>5</u>
	<input checked="" type="checkbox"/> 21b 28a	<input type="checkbox"/> 22 28b	<input type="checkbox"/> 23 28c	<input type="checkbox"/> 26 29	<input type="checkbox"/> 27 30b		

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NAME OF COMMITTEE (In Full)  
*Madam President PAC*

**A.** Full Name (Last, First, Middle Initial)  
*Facebook / Meta*

Mailing Address  
*Hacker Way*

City *Mentlo Park* State *CA* Zip Code *94025*

Purpose of Disbursement  
*Facebook ads*

Candidate Name  
*Liz Cheney*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: *WY* District: *At-Large*

Date of Disbursement  
*09 01 2022*

FEC Identification Number  
*C*

Amount of Each Disbursement this Period  
*245.90*

Memo Item *in-kind paid by MB, see p. 2 of 5*

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement *Not double-count here.*

FEC Identification Number  
*C*

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number  
*C*

Amount of Each Disbursement this Period

Memo Item

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

**TOTAL** This Period (last page this line number only).....▶ *579.69*

NON-FEDERAL CAMPAIGN FINANCING



**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)					PAGE 1 OF 1
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27	
	<input checked="" 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)  
*Madam President PAC*

**A.**

Full Name (Last, First, Middle Initial)  
*Graphic Services*

Date of Disbursement  
08/11/2022

Mailing Address  
*319 Rogers Ave*

City *Fort Smith* State *AR* Zip Code *72901*

Purpose of Disbursement  
*yard signs*

FEC Identification Number  
C

Candidate Name  
*Liz Cheney*

Category/Type  
004

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Amount of Each Disbursement this Period  
*-97.21*  
*in-kind refund due to mistakes and delay*

State: *WY* District: *At-Large*

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

FEC Identification Number

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Amount of Each Disbursement this Period

State:

District:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

FEC Identification Number

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Amount of Each Disbursement this Period

State:

District:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<i>97.21</i>
TOTAL This Period (last page this line number only).....▶	<i>97.21</i>

NON-FEDERAL CAMPAIGN ACCOUNT



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <i>Madam President PAC</i>	FEC IDENTIFICATION NUMBER <i>C</i>
---	---------------------------------------

Check if  24-hour report  48-hour report  **New report** Amends report filed on  M  D  Y

Full Name of Payee <i>Facebook / Meta</i>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <i>08 12 2022</i>	
Mailing Address <i>1 Hacker Way</i>			Amount <i>245.90</i>	
City <i>Menlo Park</i>	State <i>CA</i>	Zip Code <i>94025</i>	Date of Disbursement or Obligation <i>09 01 2022</i>	
Purpose of Expenditure <i>Facebook ads</i>		Category/Type <i>004</i>		
Name of Federal Candidate: <i>Liz Cheney</i>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: <i>At Large</i> State: <i>WY</i>
Calendar Year-To-Date Per Election for Office Sought <i>60,581</i>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination	
Mailing Address			Amount	
City	State	Zip Code	Date of Disbursement or Obligation	
Purpose of Expenditure		Category/Type		
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures .....	<i>245.90</i>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<i>359.91</i>
(a) TOTAL Independent Expenditures .....	<i>605.81</i>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*M. Boyd*  
Signature

Date *10 16 2022*

NON-FEDERAL CAMPAIGN CONTRIBUTION



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt
Postmarked <i>N/A</i>	<i>10/26/22</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>WFD</i> PREPARER	<i>10/26/22</i> DATE PREPARED

(3/2015)

NON-FUNCTIONAL ON 08/28/2015