

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 WITH HONOR PAC

ADDRESS (number and street) PO BOX 1843 ALEXANDRIA VA 22313 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00661272 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2022 through 03 / 31 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. KOCH, TIMOTHY, A., Type or Print Name of Treasurer

Signature of Treasurer KOCH, TIMOTHY, A., [Electronically Filed] Date 04 / 14 / 2022

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

**WITH HONOR PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		284356.92
(b) Cash on Hand at Beginning of Reporting Period.....	284356.92	
(c) Total Receipts (from Line 19) .....	65500.00	65500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	349856.92	349856.92
7. Total Disbursements (from Line 31).....	109782.91	109782.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	240074.01	240074.01
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**WITH HONOR PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	65500.00	65500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	65500.00	65500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	65500.00	65500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	65500.00	65500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	65500.00	65500.00

**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 .....	4782.91	4782.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4782.91	4782.91
22. Transfers to Affiliated/Other Party Committees.....	45000.00	45000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	59500.00	59500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	500.00	500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	109782.91	109782.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	109782.91	109782.91

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	65500.00	65500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	65500.00	65500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4782.91	4782.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4782.91	4782.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 22
	(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

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)  
**WITH HONOR PAC**

**A. Bezos, Jacklyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7683 SE 27th St  
 Suite 224  
 City Mercer Island State WA Zip Code 98040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2022  
**Transaction ID : SA11AI.7159**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Contribution

**B. Bezos, Miguel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7683 SE 27th St  
 Suite 224  
 City Mercer Island State WA Zip Code 98040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2022  
**Transaction ID : SA11AI.7158**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Contribution

**C. Bos, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 656 5th Avenue N  
 City Naples State FL Zip Code 34102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 18 / 2022  
**Transaction ID : SA11AI.7134**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> 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 22
	<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)  
**WITH HONOR PAC**

**A. Cooper-Bos, Sissel, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 656 5th Ave. N  
 City Naples State FL Zip Code 34102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 18 / 2022  
**Transaction ID : SA11AI.7136**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**B. Finke, Heather, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 671 Llewellyn Place  
 City Charlotte State NC Zip Code 28207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 14 / 2022  
**Transaction ID : SA11AI.7140**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**C. Finke, Thomas, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 671 Llewellyn Place  
 City Charlotte State NC Zip Code 28207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 14 / 2022  
**Transaction ID : SA11AI.7141**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 22
	<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)  
**WITH HONOR PAC**

**A. Hanover, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5517 Shady Grove Terrace  
 City Memphis State TN Zip Code 38120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Union Main Group LLC Occupation (for Individual) Private Equity  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 14 / 2022  
**Transaction ID : SA11AI.7137**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Jones, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3706 North Woodrow St  
 City Arlington State VA Zip Code 22207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 20 / 2022  
**Transaction ID : SA11AI.7151**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Jones, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3706 North Woodrow St  
 City Arlington State VA Zip Code 22207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Veterans Legal Institute Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 20 / 2022  
**Transaction ID : SA11AI.7155**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> 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 22
	<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)  
**WITH HONOR PAC**

**A. Munichiello, Dave, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2995 Woodside Rd, Suite 400  
 City Woodside State CA Zip Code 94062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GV Occupation (for Individual) General Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 09 / 2022  
**Transaction ID : SA11AI.7162**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Neil, Francis, James, Jr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2727 LBJ Freeway Ste. 600  
 City Dallas State TX Zip Code 75234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Churchill Capital Company Occupation (for Individual) Commerical Real Estate Mort. Banker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 31 / 2022  
**Transaction ID : SA11AI.7143**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Neil, Jean, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2727 LBJ Freeway Ste. 600  
 City Dallas State TX Zip Code 75234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Volunteer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 31 / 2022  
**Transaction ID : SA11AI.7142**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 10 OF 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Oeste, Monte, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2275 South Ocean Blvd  
 308N  
 City State Zip Code  
 Palm Beach FL 33480  
 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 ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2022  
**Transaction ID : SA11AI.7156**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item Contribution

**B. Thiel, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2070 Oakley Ave  
 City State Zip Code  
 Menlo Park CA 94025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Self Investor  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2022  
**Transaction ID : SA11AI.7150**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item 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 M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	65500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB21B.7138

Amount of Each Disbursement this Period: 385.60

Memo Item

**B. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2022

FEC Identification Number: C

Transaction ID : SB21B.7139

Amount of Each Disbursement this Period: 385.60

Memo Item

**C. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 08 / 2022

FEC Identification Number: C

Transaction ID : SB21B.7149

Amount of Each Disbursement this Period: 192.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 964.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

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	2			2	3			2	0	2	2		

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.7152**

Amount of Each Disbursement this Period

[REDACTED] 385.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

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	3			0	4			2	0	2	2		

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.7165**

Amount of Each Disbursement this Period

[REDACTED] 19.55

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

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	3			0	8			2	0	2	2		

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.7166**

Amount of Each Disbursement this Period

[REDACTED] 385.60

Memo Item

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

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

[REDACTED] 790.75

[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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2022
Mailing Address 1340 Poydras St, Suite 1770		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7167</b> Amount of Each Disbursement this Period [REDACTED] 192.80
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Processing		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Godaddy.com</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2022
Mailing Address 14455 N Hayden Rd Suite 219		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7132</b> Amount of Each Disbursement this Period [REDACTED] 423.56
City Scottsdale	State AZ	Zip Code 85260
Purpose of Disbursement Web Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2022
Mailing Address 901 N Washington St Ste 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7144</b> Amount of Each Disbursement this Period [REDACTED] 715.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1331.36
<b>TOTAL</b> 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial) <b>A. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2022
Mailing Address 901 N Washington St Ste 700		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7153</b> Amount of Each Disbursement this Period [ ] 680.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Accounting/Compliance Services		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Mailchimp</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2022
Mailing Address 675 Ponce De Leon Ave NE Suite 5000		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7148</b> Amount of Each Disbursement this Period [ ] 189.00
City Atlanta	State GA	Zip Code 30308
Purpose of Disbursement Email Services		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Mailchimp</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2022
Mailing Address 675 Ponce De Leon Ave NE Suite 5000		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7164</b> Amount of Each Disbursement this Period [ ] 189.00
City Atlanta	State GA	Zip Code 30308
Purpose of Disbursement Email Services		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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1058.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Wix.com**

Full Name (Last, First, Middle Initial)

Mailing Address 40 Namal Tel-Aviv St

City Tel Aviv, Israel State Zip Code

Purpose of Disbursement Website Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB21B.7154

Amount of Each Disbursement this Period: 276.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	276.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4420.11

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial) <b>A. CROSSPARTISAN PAC I</b>		Date of Disbursement MM / DD / YYYY 01 / 20 / 2022
Mailing Address PO BOX 1843		FEC Identification Number C [ ] <b>Transaction ID : SB22.7145</b> Amount of Each Disbursement this Period [ ] 25000.00
City ALEXANDRIA	State VA	Zip Code 22313
Purpose of Disbursement Transfer		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 <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) <b>B. CROSSPARTISAN PAC II</b>		Date of Disbursement MM / DD / YYYY 01 / 20 / 2022
Mailing Address PO BOX 1843		FEC Identification Number C [ ] <b>Transaction ID : SB22.7146</b> Amount of Each Disbursement this Period [ ] 20000.00
City ALEXANDRIA	State VA	Zip Code 22313
Purpose of Disbursement Transfer		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 <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]
City	State	Zip Code
Purpose of Disbursement		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 <input type="checkbox"/>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 45000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 45000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)  
**A. ANDY KIM FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	18	/	2022

Mailing Address PO BOX 211

City MARLTON State NJ Zip Code 08053

FEC Identification Number

**C** C00648220

**Transaction ID : SB23.7171**

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name

**KIM, ANDY, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: NJ District: 03

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ANDY KIM FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2022

Mailing Address PO BOX 211

City MARLTON State NJ Zip Code 08053

FEC Identification Number

**C** C00648220

**Transaction ID : SB23.7184**

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name

**KIM, ANDY, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: NJ District: 03

Memo Item

Full Name (Last, First, Middle Initial)  
**C. COMMITTEE TO ELECT JARED GOLDEN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2022

Mailing Address PO BOX 7108

City LEWISTON State ME Zip Code 04240

FEC Identification Number

**C** C00653816

**Transaction ID : SB23.7183**

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name

**GOLDEN, JARED, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: ME District: 02

Memo Item

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

10000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. DON BACON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 391368

M M M	/	D D D	/	Y Y Y Y Y
01		12		2022

City OMAHA State NE Zip Code 68139

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00575167
---	-----------

Candidate Name  
**BACON, DONALD, J., ,**

Category/  
Type

**Transaction ID : SB23.7130**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: NE District: 02

2500.00
---------

Memo Item

**B. DON BACON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 391368

M M M	/	D D D	/	Y Y Y Y Y
03		25		2022

City OMAHA State NE Zip Code 68139

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00575167
---	-----------

Candidate Name  
**BACON, DONALD, J., ,**

Category/  
Type

**Transaction ID : SB23.7174**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: NE District: 02

5000.00
---------

Memo Item

**C. ELAINE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 66191

M M M	/	D D D	/	Y Y Y Y Y
03		18		2022

City VIRGINIA BEACH State VA Zip Code 23466

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00664375
---	-----------

Candidate Name  
**LURIA, ELAINE, , ,**

Category/  
Type

**Transaction ID : SB23.7169**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: VA District: 02

5000.00
---------

Memo Item

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

12500.00
----------

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

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. JAKE ELLZEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1005 CONGRESS AVENUE  
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
03		25		2022

City AUSTIN State TX Zip Code 78701

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00770438
---	-----------

Candidate Name  
**ELLZEY, JOHN KEVIN, , ,**

Category/  
Type

**Transaction ID : SB23.7176**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: TX District: 06

5000.00
---------

Memo Item

**B. JIMMY PANETTA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1579

M M M	/	D D D	/	Y Y Y Y Y
03		29		2022

City CARMEL VALLEY State CA Zip Code 93924

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00592154
---	-----------

Candidate Name  
**PANETTA, JIMMY, , ,**

Category/  
Type

**Transaction ID : SB23.7180**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: CA District: 20

2500.00
---------

Memo Item

**C. LOGEMANN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1505

M M M	/	D D D	/	Y Y Y Y Y
03		31		2022

City ROCKFORD State IL Zip Code 61110

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00791459
---	-----------

Candidate Name  
**LOGEMANN, JONATHAN, , ,**

Category/  
Type

**Transaction ID : SB23.7185**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: IL District: 17

5000.00
---------

Memo Item

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

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

12500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)  
**A. MARK KELLY FOR SENATE**

Date of Disbursement: MM / DD / YYYY  
03 / 29 / 2022

Mailing Address PO BOX 27202

City TUCSON State AZ Zip Code 85726

Purpose of Disbursement Contribution

Candidate Name  
**KELLY, MARK, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: AZ District: 00

FEC Identification Number: **C00696526**  
Transaction ID : **SB23.7177**  
Amount of Each Disbursement this Period: 2000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. MIKE GALLAGHER FOR WISCONSIN**

Date of Disbursement: MM / DD / YYYY  
03 / 18 / 2022

Mailing Address PO BOX 1027

City GREEN BAY State WI Zip Code 54305

Purpose of Disbursement Contribution

Candidate Name  
**GALLAGHER, MICHAEL JOHN, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: WI District: 08

FEC Identification Number: **C00610212**  
Transaction ID : **SB23.7170**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. MIKE GALLAGHER FOR WISCONSIN**

Date of Disbursement: MM / DD / YYYY  
03 / 25 / 2022

Mailing Address PO BOX 1027

City GREEN BAY State WI Zip Code 54305

Purpose of Disbursement Contribution

Candidate Name  
**GALLAGHER, MICHAEL JOHN, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: WI District: 08

FEC Identification Number: **C00610212**  
Transaction ID : **SB23.7175**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. MOULTON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2013

City SALEM State MA Zip Code 01970

Purpose of Disbursement Contribution

Candidate Name **MOULTON, SETH, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: MA District: 06

Date of Disbursement: 03 / 18 / 2022

FEC Identification Number: **C00547240**  
Transaction ID : **SB23.7168**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. PETER MEIJER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 68554

City GRAND RAPIDS State MI Zip Code 49516

Purpose of Disbursement Contribution

Candidate Name **MEIJER, PETER, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: MI District: 03

Date of Disbursement: 01 / 20 / 2022

FEC Identification Number: **C00710962**  
Transaction ID : **SB23.7147**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. SALUD CARBAJAL FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1290

City SANTA BARBARA State CA Zip Code 93102

Purpose of Disbursement Contribution

Candidate Name **CARBAJAL, SALUD, O., ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: CA District: 24

Date of Disbursement: 03 / 29 / 2022

FEC Identification Number: **C00576041**  
Transaction ID : **SB23.7181**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	59500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial) <b>A. Tom Smith For Maryland</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2022	
Mailing Address PO Box 663		FEC Identification Number C [ ]	
City Burtonsville	State MD	Zip Code 20866	<b>Transaction ID : SB29.7160</b>
Purpose of Disbursement Non-Federal Contribution		Category/ Type [ ]	Amount of Each Disbursement this Period 500.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00