

**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

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00661272

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WITH HONOR PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		08		2021

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2021</td></tr></table>	Y	Y	Y	Y	Y	2021						<table><tr><td colspan="5">244415.15</td></tr></table>	244415.15				
Y	Y	Y	Y	Y													
2021																	
244415.15																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">273508.87</td></tr></table>	273508.87															
273508.87																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">118130.00</td></tr></table>	118130.00					<table><tr><td colspan="5">216680.00</td></tr></table>	216680.00									
118130.00																	
216680.00																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">391638.87</td></tr></table>	391638.87					<table><tr><td colspan="5">461095.15</td></tr></table>	461095.15									
391638.87																	
461095.15																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">107281.95</td></tr></table>	107281.95					<table><tr><td colspan="5">176738.23</td></tr></table>	176738.23									
107281.95																	
176738.23																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">284356.92</td></tr></table>	284356.92					<table><tr><td colspan="5">284356.92</td></tr></table>	284356.92									
284356.92																	
284356.92																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

WITH HONOR PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
07		08		2021

To:

M M	/	D D	/	Y Y Y Y
12		31		2021

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).....

112500.00

205750.00

(ii) Unitemized

630.00

930.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

113130.00

206680.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

5000.00

10000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

118130.00

216680.00

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))

118130.00

216680.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

118130.00

216680.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	11531.95	18988.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11531.95	18988.23
22. Transfers to Affiliated/Other Party Committees.....	60000.00	60000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30500.00	92500.00
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).....	5250.00	5250.00
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)) ..	107281.95	176738.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	107281.95	176738.23

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)	118130.00	216680.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	118130.00	216680.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	11531.95	18988.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	11531.95	18988.23

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 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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

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

A. Blashek, Jordan, , ,

Mailing Address 16444 Refugio Road
11th Floor

City
Encino

State
CA

Zip Code
91436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Schmidt Futures

Occupation (for Individual)
Philanthropy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2021

Transaction ID : SA11AI.7098

Amount of Each Receipt this Period

2500.00

☐ Memo Item
Contribution

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

B. Byrd, Kahlil, , ,

Mailing Address 25 Broad St
7F

City
New York

State
NY

Zip Code
10004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Invest America

Occupation (for Individual)
Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2021

Transaction ID : SA11AI.7097

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

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

C. Clayton, Katie, , ,

Mailing Address 903 Vance St

City
Raleigh

State
NC

Zip Code
27608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
LCSW

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2021

Transaction ID : SA11AI.7122

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

8500.00

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 7 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WITH HONOR PAC

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

A. Drew, Ellen, , ,

Mailing Address 10271 W. Loyola Dr

City

Los Altos Hills

State

CA

Zip Code

94024

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
09 / 01 / 2021

Transaction ID : SA11Al.7032

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

B. Drew, John, , ,

Mailing Address 10271 West Loyola Drive

City

Los Altos Hills

State

CA

Zip Code

94024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

TCMI

Occupation (for Individual)

Venture Capital

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
08 / 29 / 2021

Transaction ID : SA11Al.7031

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

C. Finke, Heather, , ,

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
07 / 09 / 2021

Transaction ID : SA11Al.7004

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

15000.00

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 8 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WITH HONOR PAC

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

A. Finke, Thomas, M., ,

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 / D D / Y Y Y Y Y Y
07 / 09 / 2021

Transaction ID : SA11AI.7006

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

B. Flavin, Matthew, , ,

Mailing Address 3900 S Colorado Blvd

City

Cherry Hills Village

State

CO

Zip Code

80113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Concord Energy

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2021

Transaction ID : SA11AI.7123

Amount of Each Receipt this Period

2500.00

☐ Memo Item
Contribution

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

C. Gates, Robert, M., ,

Mailing Address P.O. Box 346

City

Sedro-Walley

State

WA

Zip Code

98284

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 / D D / Y Y Y Y Y Y
12 / 22 / 2021

Transaction ID : SA11AI.7108

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

12500.00

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 9 OF 32

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WITH HONOR PAC

A. Hain, Travis, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 101 S Tryon St City Charlotte State NC Zip Code 28280 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Ridgmont Equity Partners Occupation (for Individual) Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2021 Transaction ID : SA11AI.7026 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Memo Item Contribution
B. Hankin, Ann, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address PO Box 27 City Butler State MD Zip Code 21023 FEC ID number of contributing federal political committee. C 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 ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2021 Transaction ID : SA11AI.7116 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Memo Item Contribution
C. Hankin, Michael, D., , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address PO Box 27 City Butler State MD Zip Code 21023 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Brown Advisory Occupation (for Individual) CEO & Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 17 / 2021 Transaction ID : SA11AI.7094 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Memo Item Contribution
SUBTOTAL of Receipts This Page (optional)..... ▶			15000.00
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 10 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WITH HONOR PAC

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

A. Hanover, Adam, , ,

Mailing Address 5517 Shady Grove Terrace

City
MemphisState
TNZip Code
38120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Union Main Group LLCOccupation (for Individual)
Private Equity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 12 / 2021

Transaction ID : SA11AI.7024

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

B. Howard, Christopher, , ,

Mailing Address 515 Maple Ln

City
SewickleyState
PAZip Code
15143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Robert Morris UniversityOccupation (for Individual)
University Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 23 / 2021

Transaction ID : SA11AI.7109

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

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

C. Jablovkov, Igor, , ,

Mailing Address 3316 White Oak Road

City
RaleighState
NCZip Code
27609FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PryonOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2021

Transaction ID : SA11AI.7112

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

10500.00

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 11 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WITH HONOR PAC

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

A. Kallberg, Chava, , ,

Mailing Address 20 West 64th St.
22M

City
New York

State
NY

Zip Code
10023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sesame Workshop

Occupation (for Individual)
VP Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2021

Transaction ID : SA11Al.7071

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

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

B. Martinez, Walfrido, , ,

Mailing Address 135 Nod Rd

City
Ridgefield

State
CT

Zip Code
06877

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hunton Andrews Kurth LLP

Occupation (for Individual)
Lawyer

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
12 / 27 / 2021

Transaction ID : SA11Al.7111

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

C. Nauck, Fritz, , ,

Mailing Address 1843 Queens Road West

City
Charlotte

State
NC

Zip Code
28207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
McKinsey & Co.

Occupation (for Individual)
Management Consultant

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
12 / 30 / 2021

Transaction ID : SA11Al.7115

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

11000.00

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 12 OF 32

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WITH HONOR PAC

A. Platt, Laurie, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 28 Glen Abbey Dr. <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Dallas</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State TX</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 75248</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: 1px solid black; padding: 2px;">Name of Employer (for Individual) Homemaker</td> <td style="width: 60%; border: 1px solid black; padding: 2px;">Occupation (for Individual) Homemaker</td> </tr> </table> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <div style="float: right; text-align: right;"> Aggregate Year-to-Date ▼ 5000.00 </div>			City Dallas	State TX	Zip Code 75248	Name of Employer (for Individual) Homemaker	Occupation (for Individual) Homemaker	Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 07 26 2021 </div> Transaction ID : SA11AI.7007 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 5000.00 </div> <input type="checkbox"/> Memo Item Contribution
City Dallas	State TX	Zip Code 75248						
Name of Employer (for Individual) Homemaker	Occupation (for Individual) Homemaker							
B. Platt, Todd, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 28 Glen Abbey Dr. <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Dallas</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State TX</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 75248</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: 1px solid black; padding: 2px;">Name of Employer (for Individual) Hillwood Investments</td> <td style="width: 60%; border: 1px solid black; padding: 2px;">Occupation (for Individual) CEO</td> </tr> </table> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <div style="float: right; text-align: right;"> Aggregate Year-to-Date ▼ 5000.00 </div>			City Dallas	State TX	Zip Code 75248	Name of Employer (for Individual) Hillwood Investments	Occupation (for Individual) CEO	Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 07 26 2021 </div> Transaction ID : SA11AI.7008 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 5000.00 </div> <input type="checkbox"/> Memo Item Contribution
City Dallas	State TX	Zip Code 75248						
Name of Employer (for Individual) Hillwood Investments	Occupation (for Individual) CEO							
C. Rogers, Mary Anne, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 330 Eastover Road <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: 1px solid black; padding: 2px;">City Charlotte</td> <td style="width: 15%; border: 1px solid black; padding: 2px;">State NC</td> <td style="width: 52%; border: 1px solid black; padding: 2px;">Zip Code 28207</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: 1px solid black; padding: 2px;">Name of Employer (for Individual) Retired</td> <td style="width: 60%; border: 1px solid black; padding: 2px;">Occupation (for Individual) Retired</td> </tr> </table> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <div style="float: right; text-align: right;"> Aggregate Year-to-Date ▼ 5000.00 </div>			City Charlotte	State NC	Zip Code 28207	Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 12 09 2021 </div> Transaction ID : SA11AI.7086 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 5000.00 </div> <input type="checkbox"/> Memo Item Contribution
City Charlotte	State NC	Zip Code 28207						
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired							
SUBTOTAL of Receipts This Page (optional)..... ▶		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 15000.00 </div>						
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 13 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WITH HONOR PAC

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

A. Sheehan, Nina, , ,

Mailing Address 8301 Fairview Road

City
Charlotte

State
NC

Zip Code
28226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Homemaker

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2021

Transaction ID : SA11AI.7043

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

B. Sheehan, Patrick, , ,

Mailing Address 8301 Fairview Road

City
Charlotte

State
NC

Zip Code
28226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Elevation LLC

Occupation (for Individual)
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2021

Transaction ID : SA11AI.7042

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

C. Solomon, Larry, , ,

Mailing Address 855 El Camino Real
13A-353

City
Palo Alto

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Capital Group

Occupation (for Individual)
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2021

Transaction ID : SA11AI.7106

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

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

15000.00

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 32

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WITH HONOR PAC

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Thukkaram, Navin, , ,</p> <p>Mailing Address PO Box 980970</p> <p>City Park City State UT Zip Code 84098</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) Self-Employed Occupation (for Individual) Entrepreneur</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 2500.00</p>			<p>Date of Receipt 12 / 23 / 2021 Transaction ID : SA11AI.7113 </p> <p>Amount of Each Receipt this Period 2500.00</p> <p><input type="checkbox"/> Memo Item Contribution</p>	
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Turner, Shawn, , ,</p> <p>Mailing Address 635 Vine St.</p> <p>City Denver State CO Zip Code 80206</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) Holland & Knight, LLP Occupation (for Individual) Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 5000.00</p>			<p>Date of Receipt 10 / 26 / 2021 Transaction ID : SA11AI.7054 </p> <p>Amount of Each Receipt this Period 5000.00</p> <p><input type="checkbox"/> Memo Item Contribution</p>	
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. West, J. Robinson, , ,</p> <p>Mailing Address 1015 18th St NW Suite 710</p> <p>City Washington State DC Zip Code 20036</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) BCG Occupation (for Individual) Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </p> <p>Aggregate Year-to-Date ▼ 2500.00</p>			<p>Date of Receipt 12 / 20 / 2021 Transaction ID : SA11AI.7095 </p> <p>Amount of Each Receipt this Period 2500.00</p> <p><input type="checkbox"/> Memo Item Contribution</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			10000.00	
<p>TOTAL This Period (last page this line number only)..... ▶</p>			112500.00	

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

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

FOR LINE NUMBER: PAGE 15 OF 32
(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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC

Mailing Address 9800 FREDERICKSBURG ROAD

City
SAN ANTONIO

State
TX

Zip Code
78288

FEC ID number of contributing
federal political committee.

C

C00164145

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2021

Transaction ID : SA11C.7084

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

5000.00

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 32

<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 OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	3					2	0	2

FEC Identification Number

C**Transaction ID : SB21B.7003**

Amount of Each Disbursement this Period

385.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				2	0					2	0	2

FEC Identification Number

C**Transaction ID : SB21B.7030**

Amount of Each Disbursement this Period

192.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	1					2	0	2

FEC Identification Number

C**Transaction ID : SB21B.7033**

Amount of Each Disbursement this Period

192.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

771.20

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 17 OF 32

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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 / D D / Y Y Y Y Y Y
09 / 03 / 2021

FEC Identification Number

C

Transaction ID : SB21B.7034

Amount of Each Disbursement this Period

192.80

☐ 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 / D D / Y Y Y Y Y Y
10 / 01 / 2021

FEC Identification Number

C

Transaction ID : SB21B.7046

Amount of Each Disbursement this Period

385.60

☐ 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 / D D / Y Y Y Y Y Y
10 / 29 / 2021

FEC Identification Number

C

Transaction ID : SB21B.7058

Amount of Each Disbursement this Period

192.80

☐ Memo Item

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

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

771.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 32

<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 OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			09			2021					

FEC Identification Number

C**Transaction ID : SB21B.7077**

Amount of Each Disbursement this Period

38.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			10			2021					

FEC Identification Number

C**Transaction ID : SB21B.7078**

Amount of Each Disbursement this Period

7.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			15			2021					

FEC Identification Number

C**Transaction ID : SB21B.7080**

Amount of Each Disbursement this Period

2.23

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.26

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 32

<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 OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2021

FEC Identification Number

C**Transaction ID : SB21B.7093**

Amount of Each Disbursement this Period

196.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2021

FEC Identification Number

C**Transaction ID : SB21B.7110**

Amount of Each Disbursement this Period

96.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2021

FEC Identification Number

C**Transaction ID : SB21B.7118**

Amount of Each Disbursement this Period

629.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

923.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 32

<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 OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		28		2021

FEC Identification Number

C**Transaction ID : SB21B.7119**

Amount of Each Disbursement this Period

19.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		29		2021

FEC Identification Number

C**Transaction ID : SB21B.7120**

Amount of Each Disbursement this Period

192.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2021

FEC Identification Number

C**Transaction ID : SB21B.7121**

Amount of Each Disbursement this Period

385.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

597.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 32

<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. Filip, Allan, , ,

Mailing Address 4358 High Oak Lane

City
FairfaxState
VAZip Code
22030Purpose of Disbursement
PAC Expense Reimbursement: See Memos

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2021

FEC Identification Number

C**Transaction ID : SB21B.7059**

Amount of Each Disbursement this Period

1785.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2021

FEC Identification Number

C**Transaction ID : SB21B.7059.2**

Amount of Each Disbursement this Period

516.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Emeline Hotel

Mailing Address 181 Church St.

City
CharlestonState
SCZip Code
29401Purpose of Disbursement
PAC Lodging

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2021

FEC Identification Number

C**Transaction ID : SB21B.7059.**

Amount of Each Disbursement this Period

1028.28

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1785.31

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 32

<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. Godaddy.com

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	2			2	0	2	1		

Mailing Address 14455 N Hayden Rd
Suite 219City
ScottsdaleState
AZZip Code
85260Purpose of Disbursement
Domain Registrations/Renewals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.7057**

Amount of Each Disbursement this Period

2032.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Godaddy.com

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	6			2	0	2	1		

Mailing Address 14455 N Hayden Rd
Suite 219City
ScottsdaleState
AZZip Code
85260Purpose of Disbursement
Domain Registrations

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.7079**

Amount of Each Disbursement this Period

49.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Koch & Hoos, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	2	1		

Mailing Address 901 N Washington St
Ste 700City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.7010**

Amount of Each Disbursement this Period

735.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2816.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 32

<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. Koch & Hoos, LLCMailing Address 901 N Washington St
Ste 700City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2021

FEC Identification Number

C**Transaction ID : SB21B.7027**

Amount of Each Disbursement this Period

565.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Koch & Hoos, LLCMailing Address 901 N Washington St
Ste 700City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2021

FEC Identification Number

C**Transaction ID : SB21B.7037**

Amount of Each Disbursement this Period

665.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Koch & Hoos, LLCMailing Address 901 N Washington St
Ste 700City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2021

FEC Identification Number

C**Transaction ID : SB21B.7056**

Amount of Each Disbursement this Period

770.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 32

<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. Koch & Hoos, LLCMailing Address 901 N Washington St
Ste 700City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	9			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.7083**

Amount of Each Disbursement this Period

345.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Koch & Hoos, LLCMailing Address 901 N Washington St
Ste 700City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	2			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.7105**

Amount of Each Disbursement this Period

575.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MailchimpMailing Address 675 Ponce De Leon Ave NE
Suite 5000City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Email Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	2			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.7047**

Amount of Each Disbursement this Period

170.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1090.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 32

<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. MailchimpMailing Address 675 Ponce De Leon Ave NE
Suite 5000City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Email Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	0			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.7076**

Amount of Each Disbursement this Period

170.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MailchimpMailing Address 675 Ponce De Leon Ave NE
Suite 5000City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Email Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	0			2	0	2	1		

FEC Identification Number

C**Transaction ID : SB21B.7092**

Amount of Each Disbursement this Period

170.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

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).....▶

340.00

11143.71

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 32

<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)

A. CROSSPARTISAN PAC I

Mailing Address PO BOX 1843

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
Transfer

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2021

FEC Identification Number

C**Transaction ID : SB22.7022**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CROSSPARTISAN PAC I

Mailing Address PO BOX 1843

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
Transfer

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2021

FEC Identification Number

C**Transaction ID : SB22.7029**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CROSSPARTISAN PAC II

Mailing Address PO BOX 1843

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
Transfer

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2021

FEC Identification Number

C**Transaction ID : SB22.7023**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

35000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 32

<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)

A. CROSSPARTISAN PAC II

Mailing Address PO BOX 1843

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
Transfer

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2021

FEC Identification Number

C**Transaction ID : SB22.7028**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

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).....▶

25000.00

60000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 32

<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. CHRISSY HOULAHAN FOR CONGRESS

Mailing Address PO BOX 222

City
DEVONState
PAZip Code
19333Purpose of Disbursement
Contribution

Candidate Name

HOULAHAN, CHRISSY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	4			2	0	2	1		

FEC Identification Number

C C00637371**Transaction ID : SB23.7016**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISSY HOULAHAN FOR CONGRESS

Mailing Address PO BOX 222

City
DEVONState
PAZip Code
19333Purpose of Disbursement
Contribution

Candidate Name

HOULAHAN, CHRISSY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	2	1		

FEC Identification Number

C C00637371**Transaction ID : SB23.7041**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT JARED GOLDEN

Mailing Address PO BOX 7108

City
LEWISTONState
MEZip Code
04240Purpose of Disbursement
Contribution

Candidate Name

GOLDEN, JARED, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: ME

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	0			2	0	2	1		

FEC Identification Number

C C00653816**Transaction ID : SB23.7088**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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)

PAGE 29 OF 32

☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WITH HONOR PAC

Full Name (Last, First, Middle Initial)

A. GALLEGO FOR ARIZONA

Mailing Address PO BOX 1710

City
PHOENIX

State
AZ

Zip Code
85001

Purpose of Disbursement
Contribution

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District: 07

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 24 / 2021

FEC Identification Number

C C00558627

Transaction ID : SB23.7038

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JAKE ELLZEY FOR CONGRESS

Mailing Address 1005 CONGRESS AVENUE
SUITE 400

City
AUSTIN

State
TX

Zip Code
78701

Purpose of Disbursement
Contribution

Candidate Name

ELLZEY, JOHN KEVIN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 06

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 23 / 2021

FEC Identification Number

C C00770438

Transaction ID : SB23.7081

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KAHELE FOR CONGRESS

Mailing Address P.O. BOX 4952

City
HILO

State
HI

Zip Code
96720

Purpose of Disbursement
Contribution

Candidate Name

KAHELE, KAIALI'I, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: HI

District: 02

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 21 / 2021

FEC Identification Number

C C00694604

Transaction ID : SB23.7036

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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. MILLER-MEEKS FOR CONGRESS

Mailing Address PO BOX 33

City
OTTUMWAState
IAZip Code
52501Purpose of Disbursement
Contribution

Candidate Name

MILLER-MEEKS, MARIANNETTE JANE, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	2	1		

FEC Identification Number

C C00558825**Transaction ID : SB23.7082**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SERVICE FIRST WOMEN'S VICTORY FUND

Mailing Address PO BOX 9

City
LEXINGTONState
KYZip Code
40588Purpose of Disbursement
Contribution to JFC (See Allocations)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	2	1		

FEC Identification Number

C C00700237**Transaction ID : SB23.7048**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MIKIE SHERRILL FOR CONGRESS

Mailing Address P.O. BOX 43032

City
MONTCLAIRState
NJZip Code
07043Purpose of Disbursement
JFC Allocation

Candidate Name

SHERRILL, REBECCA MICHELLE, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 11

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	2	1		

FEC Identification Number

C C00640003**Transaction ID : SB23.7048.0**

Amount of Each Disbursement this Period

2500.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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. ELISSA SLOTKIN FOR CONGRESS

Mailing Address PO BOX 244

City
HOLLYState
MIZip Code
48442Purpose of Disbursement
JFC Allocation

Candidate Name

SLOTKIN, ELISSA, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

FEC Identification Number

C C00650150**Transaction ID : SB23.7048.1**

Amount of Each Disbursement this Period

2500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TONY GONZALES FOR CONGRESSMailing Address 14439 NW MILITARY HWY
STE 108-488City
SAN ANTONIOState
TXZip Code
78231Purpose of Disbursement
Contribution

Candidate Name

GONZALES, ERNEST ANTHONY, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify)

State: TX District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2021

FEC Identification Number

C C00706614**Transaction ID : SB23.7044**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

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).....▶

5000.00

30500.00

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)

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☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WITH HONOR PAC

Full Name (Last, First, Middle Initial)

A. Wes Moore for Maryland

Mailing Address PO Box 50123

City
Baltimore

State
MD

Zip Code
21211

Purpose of Disbursement
Non-Federal Contribution

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
08 / 04 / 2021

FEC Identification Number

C

Transaction ID : SB29.7014

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wes Moore for Maryland

Mailing Address PO Box 50123

City
Baltimore

State
MD

Zip Code
21211

Purpose of Disbursement
Non-Federal Contribution

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
08 / 06 / 2021

FEC Identification Number

C

Transaction ID : SB29.7126

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

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)..... ►

5250.00

5250.00