

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MISES 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="2020"/>	<input type="text"/>	<input type="text" value="6001.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10719.65"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19360.16"/>	<input type="text" value="53273.03"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="30079.81"/>	<input type="text" value="59274.08"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="26298.47"/>	<input type="text" value="55492.74"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3781.34"/>	<input type="text" value="3781.34"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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)

Write or Type Committee Name

MISES PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2020 To: M M / D D / Y Y Y Y 09 / 30 / 2020

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).....	4976.80	13738.05
(ii) Unitemized	13378.40	36029.46
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	18355.20	49767.51
(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)	18355.20	49767.51
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).....	1004.96	3505.52
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)).....▶	19360.16	53273.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19360.16	53273.03

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	13298.47	39942.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13298.47	39942.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	2300.00
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).....	12000.00	13250.00
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)) ..	26298.47	55492.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26298.47	55492.74

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)	18355.20	49767.51
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18355.20	49767.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13298.47	39942.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1004.96	3505.52
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12293.51	36437.22

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MISES PAC

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

Mailing Address 1521 2nd avenue unit 3100

City seattle	State WA	Zip Code 98101
-----------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2764.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2020

Transaction ID : SA11AI.4576

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 14 N Central 107

City Casey	State IL	Zip Code 62420
---------------	-------------	-------------------

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

Name of Employer (for Individual) Prairie Grass Enterprises LLP	Occupation (for Individual) REI
--	------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
362.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2020

Transaction ID : SA11AI.5544

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 14 N Central 107

City Casey	State IL	Zip Code 62420
---------------	-------------	-------------------

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

Name of Employer (for Individual) Prairie Grass Enterprises LLP	Occupation (for Individual) REI
--	------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
387.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2020

Transaction ID : SA11AI.6014

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bookwalter, Charles, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 22 / 2020
Mailing Address 7490 North 1075 West		Transaction ID : SA11AI.4917
City Thorntown	State IN	Zip Code 46071
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Intuitive	Occupation (for Individual) Sales / Entrepreneur	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bookwalter, Charles, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 18 / 2020
Mailing Address 7490 North 1075 West		Transaction ID : SA11AI.5384
City Thorntown	State IN	Zip Code 46071
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Intuitive	Occupation (for Individual) Sales / Entrepreneur	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bookwalter, Charles, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2020
Mailing Address 7490 North 1075 West		Transaction ID : SA11AI.5914
City Thorntown	State IN	Zip Code 46071
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Intuitive	Occupation (for Individual) Sales / Entrepreneur	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Combs, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 931 Fletcher Avenue
 212
 City Indianapolis State IN Zip Code 46203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Elanco Occupation (for Individual) Sr. Analyst
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 04 / 2020
Transaction ID : SA11AI.4625
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Combs, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 931 Fletcher Avenue
 212
 City Indianapolis State IN Zip Code 46203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Elanco Occupation (for Individual) Sr. Analyst
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2020
Transaction ID : SA11AI.5181
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Combs, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 931 Fletcher Avenue
 212
 City Indianapolis State IN Zip Code 46203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Elanco Occupation (for Individual) Sr. Analyst
 Receipt For: 2020
 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
 09 / 04 / 2020
Transaction ID : SA11AI.5759
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. cox, nathan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 993 Cardon Drive
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nate's Dryer Vent Cleaning Occupation (for Individual) dryer vent specialist
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2020
Transaction ID : SA11AI.5558
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Engel, C.Jay, , ,
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2020
Transaction ID : SA11AI.6253
 Amount of Each Receipt this Period
 900.00
 Memo Item

C. Gruber, Christian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 Forest Park Ct
 City Pacifica State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Square, Inc. Occupation (for Individual) Software Engineer
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2020
Transaction ID : SA11AI.4986
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 10 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Gruber, Christian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 Forest Park Ct
 City Pacifica State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Square, Inc. Occupation (for Individual) Software Engineer
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2020
Transaction ID : SA11AI.5638
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Gruber, Christian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 Forest Park Ct
 City Pacifica State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Square, Inc. Occupation (for Individual) Software Engineer
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2020
Transaction ID : SA11AI.6067
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Ingalls, Benjamin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 Ingalls Pond Rd
 City Milford State NY Zip Code 13807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Contractor
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 339.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2020
Transaction ID : SA11AI.4757
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 11 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Ingalls, Benjamin, , ,		Date of Receipt MM / DD / YYYY 08 / 12 / 2020
Mailing Address 132 Ingalls Pond Rd		Transaction ID : SA11AI.5273
City Milford	State NY	Zip Code 13807
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) Self	Occupation (for Individual) Contractor	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 364.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ingalls, Benjamin, , ,		Date of Receipt MM / DD / YYYY 09 / 12 / 2020
Mailing Address 132 Ingalls Pond Rd		Transaction ID : SA11AI.5849
City Milford	State NY	Zip Code 13807
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) Self	Occupation (for Individual) Contractor	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ludlow, Lawrence, , ,		Date of Receipt MM / DD / YYYY 07 / 19 / 2020
Mailing Address 1100 Whittier Road		Transaction ID : SA11AI.4850
City Grosse Pointe Park	State MI	Zip Code 48230
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Pannell Jr, Richard Reed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2853 Robin Road
 City York State PA Zip Code 17404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Recovery Market Solutions LLC Occupation (for Individual) Managing Member
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2020
Transaction ID : SA11AI.6051
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Sabrin, Murray, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 Palisade Ave. Apt. 2F
 City Fort Lee State NJ Zip Code 07024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ramapo College Occupation (for Individual) professor
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2020
Transaction ID : SA11AI.6019
 Amount of Each Receipt this Period
 51.80
 Memo Item

C. Scott, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 Vine Street
 1418 Vine St Apt. 12
 City Lansing State MI Zip Code 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AF Group Occupation (for Individual) Actuary
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2436.78

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2020
Transaction ID : SA11AI.5494
 Amount of Each Receipt this Period
 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	551.80
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 30
	<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)
MISES PAC

A. Scott, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 Vine Street
 1418 Vine St Apt. 12
 City Lansing State MI Zip Code 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AF Group Occupation (for Individual) Actuary
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2836.78

Date of Receipt
 09 / 20 / 2020
Transaction ID : SA11AI.5976
 Amount of Each Receipt this Period
 400.00
 Memo Item

B. Steinberg, Jamie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3359 Vaux Street
 City Philadelphia State PA Zip Code 19129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southern Glazer's Wine & Spirits Occupation (for Individual) Sales Representative
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 07 / 20 / 2020
Transaction ID : SA11AI.4874
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Waguespack, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Caribou Ct
 City Metairie State LA Zip Code 70003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) - Occupation (for Individual) -
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 09 / 10 / 2020
Transaction ID : SA11AI.5830
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Woods, Thomas, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7125 Indian Grass Road
City Saint Cloud State FL Zip Code 34773
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) self Occupation (for Individual) historian
Receipt For: 2020 Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 29 / 2020
Transaction ID : SA11AI.5067
Amount of Each Receipt this Period 100.00
 Memo Item

B. Woods, Thomas, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7125 Indian Grass Road
City Saint Cloud State FL Zip Code 34773
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) self Occupation (for Individual) historian
Receipt For: 2020 Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 29 / 2020
Transaction ID : SA11AI.5675
Amount of Each Receipt this Period 100.00
 Memo Item

C. Woods, Thomas, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7125 Indian Grass Road
City Saint Cloud State FL Zip Code 34773
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) self Occupation (for Individual) historian
Receipt For: 2020 Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2020
Transaction ID : SA11AI.6105
Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 15 OF 30
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

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

Mailing Address 8184 Antietam Dr

City Lewisberry	State PA	Zip Code 17339
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		25		2020

Transaction ID : SA11AI.6074

Amount of Each Receipt this Period
100.00

Memo Item

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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	4976.80

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

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

FOR LINE NUMBER: PAGE 16 OF 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Young Americans for Liberty Foundation

Mailing Address 500 N Capital of Texas Hwy

City Austin	State TX	Zip Code 78746
----------------	-------------	-------------------

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 ▼
800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2020

Transaction ID : SA15.6216

Amount of Each Receipt this Period
750.00

Memo Item Refund

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	750.00

**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)
MISES PAC

Full Name (Last, First, Middle Initial)
A. American Airlines

Mailing Address 1 Skyview Drive

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.6140**

Amount of Each Disbursement this Period: 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. American Airlines

Mailing Address 1 Skyview Drive

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 13 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.6143**

Amount of Each Disbursement this Period: 34.10

Memo Item

Full Name (Last, First, Middle Initial)
C. American Airlines

Mailing Address 1 Skyview Drive

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 13 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.6144**

Amount of Each Disbursement this Period: 129.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 193.20

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
MISES PAC

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address 1 Skyview Drive		FEC Identification Number C Transaction ID : SB21B.6145 Amount of Each Disbursement this Period 129.10
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020
Mailing Address 1 Skyview Drive		FEC Identification Number C Transaction ID : SB21B.6150 Amount of Each Disbursement this Period 30.00
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement MM / DD / YYYY 09 / 21 / 2020
Mailing Address 1340 Poydras Street Suite 1770		FEC Identification Number C Transaction ID : SB21B.6237 Amount of Each Disbursement this Period 2.00
City New Orleans	State LA	
Zip Code 70112-5204	Purpose of Disbursement ACH Return Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

161.10

**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)
MISES PAC

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement MM / DD / YYYY 09 / 30 / 2020
Mailing Address 1340 Poydras Street Suite 1770		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6211 Amount of Each Disbursement this Period [REDACTED] 1030.37
City New Orleans	State LA	Zip Code 70112-5204
Purpose of Disbursement Donation processing fees		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. Aristotle		Date of Disbursement MM / DD / YYYY 07 / 02 / 2020
Mailing Address 205 Pennsylvania Ave, SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6131 Amount of Each Disbursement this Period [REDACTED] 1000.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Technology 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) C. Aristotle		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020
Mailing Address 205 Pennsylvania Ave, SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6134 Amount of Each Disbursement this Period [REDACTED] 500.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Technology 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	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2530.37
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Aristotle

Full Name (Last, First, Middle Initial)

Mailing Address 205 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Technology services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6165

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Aristotle

Full Name (Last, First, Middle Initial)

Mailing Address 205 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Technology services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6189

Amount of Each Disbursement this Period: 500.00

Memo Item

C. Drip

Full Name (Last, First, Middle Initial)

Mailing Address 251 N. 1st Avenue, Suite 400

City Minneapolis State MN Zip Code 55401

Purpose of Disbursement Technology services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6146

Amount of Each Disbursement this Period: 122.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1122.00

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)
MISES PAC

Full Name (Last, First, Middle Initial) A. Drip		Date of Disbursement MM / DD / YYYY 08 / 11 / 2020
Mailing Address 251 N. 1st Avenue, Suite 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6173 Amount of Each Disbursement this Period [REDACTED] 122.00
City Minneapolis	State MN	Zip Code 55401
Purpose of Disbursement Technology 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. Drip		Date of Disbursement MM / DD / YYYY 09 / 14 / 2020
Mailing Address 251 N. 1st Avenue, Suite 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6199 Amount of Each Disbursement this Period [REDACTED] 122.00
City Minneapolis	State MN	Zip Code 55401
Purpose of Disbursement Technology 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) C. Harris, Aaron, , ,		Date of Disbursement MM / DD / YYYY 07 / 06 / 2020
Mailing Address 1100 Gainsborough Road		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6238 Amount of Each Disbursement this Period [REDACTED] 200.00
City Dayton	State OH	Zip Code 45419
Purpose of Disbursement Consulting 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	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 444.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. Harris, Aaron, , ,		Date of Disbursement MM / DD / YYYY 08 / 25 / 2020
Mailing Address 1100 Gainsborough Road		FEC Identification Number C Transaction ID : SB21B.6241 Amount of Each Disbursement this Period 200.00
City Dayton	State OH	
Zip Code 45419		Memo Item <input type="checkbox"/>
Purpose of Disbursement Consulting services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Harris, Aaron, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2020
Mailing Address 1100 Gainsborough Road		FEC Identification Number C Transaction ID : SB21B.6243 Amount of Each Disbursement this Period 200.00
City Dayton	State OH	
Zip Code 45419		Memo Item <input type="checkbox"/>
Purpose of Disbursement Consulting services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Heise, Michael, , ,		Date of Disbursement MM / DD / YYYY 07 / 06 / 2020
Mailing Address 450 Forrest Ave, Apt. J206		FEC Identification Number C Transaction ID : SB21B.6239 Amount of Each Disbursement this Period 400.00
City Norristown	State PA	
Zip Code 19401-5664		Memo Item <input type="checkbox"/>
Purpose of Disbursement Consulting services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

800.00

**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)
MISES PAC

Full Name (Last, First, Middle Initial) A. Maggiano's Little Italy		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020	
Mailing Address 9101 International Dr,		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6148 Amount of Each Disbursement this Period [REDACTED] 665.82	
City Orlando	State FL	Zip Code 32819	Category/ Type [REDACTED]
Purpose of Disbursement Event food		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Roberts Printing Company		Date of Disbursement MM / DD / YYYY 07 / 31 / 2020	
Mailing Address 207 E 8th St		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6164 Amount of Each Disbursement this Period [REDACTED] 208.92	
City Georgetown	State TX	Zip Code 78626	Category/ Type [REDACTED]
Purpose of Disbursement Merchandise		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Rosen Hotel Orlando		Date of Disbursement MM / DD / YYYY 07 / 07 / 2020	
Mailing Address 9700 International Drive		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6139 Amount of Each Disbursement this Period [REDACTED] 885.29	
City Orlando	State FL	Zip Code 32819	Category/ Type [REDACTED]
Purpose of Disbursement Lodging		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1760.03
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. Rosen Hotel Orlando		Date of Disbursement MM / DD / YYYY 07 / 14 / 2020	
Mailing Address 9700 International Drive		FEC Identification Number C [] Transaction ID : SB21B.6149 Amount of Each Disbursement this Period [] 606.78	
City Orlando	State FL	Zip Code 32819	Category/Type []
Purpose of Disbursement Lodging			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Rosen Hotel Orlando		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020	
Mailing Address 9700 International Drive		FEC Identification Number C [] Transaction ID : SB21B.6151 Amount of Each Disbursement this Period [] 1482.17	
City Orlando	State FL	Zip Code 32819	Category/Type []
Purpose of Disbursement Lodging			
Candidate Name		Memo Item <input type="checkbox"/>	
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) C. UPS		Date of Disbursement MM / DD / YYYY 09 / 10 / 2020	
Mailing Address 55 Glenlake ParkwayNortheast		FEC Identification Number C [] Transaction ID : SB21B.6198 Amount of Each Disbursement this Period [] 257.88	
City Sandy Springs	State GA	Zip Code 30328	Category/Type []
Purpose of Disbursement Shipping service			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2346.83
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)
MISES PAC

A. Young Americans for Liberty Foundation

Full Name (Last, First, Middle Initial)

Mailing Address 500 N Capital of Texas Hwy

City Austin State TX Zip Code 78746

Purpose of Disbursement Event table cost

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 07 / 30 / 2020

FEC Identification Number C

Transaction ID : SB21B.6214

Amount of Each Disbursement this Period 750.00

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

SUBTOTAL of Disbursements This Page (optional)..... ▶ 750.00

TOTAL This Period (last page this line number only)..... ▶ 11507.53

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)
MISES PAC

Full Name (Last, First, Middle Initial)

A. Libertarian Party of Florida

Mailing Address 2907 PATTERSON AVE

City
KEY WEST

State
FL

Zip Code
33040

Purpose of Disbursement

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
08	/	17	/	2020

FEC Identification Number

C C00482372

Transaction ID : SB23.6223

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement 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
 President

Disbursement 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).....▶

1000.00

1000.00

**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)
MISES PAC

Full Name (Last, First, Middle Initial) A. Andre Klass, Libertarian, for Seminole County Commission, District 5		Date of Disbursement MM / DD / YYYY 08 / 19 / 2020
Mailing Address P.O. Box 470665		FEC Identification Number C [] Transaction ID : SB29.6219 Amount of Each Disbursement this Period [] 1000.00
City Lake Monroe	State FL	Zip Code 32747
Purpose of Disbursement Non-federal candidate contribution		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. Committee to Elect David Tyler 2020		Date of Disbursement MM / DD / YYYY 09 / 30 / 2020
Mailing Address 4701 Fountain Ave		FEC Identification Number C [] Transaction ID : SB29.6251 Amount of Each Disbursement this Period [] 1500.00
City East Ridge	State TN	Zip Code 37412
Purpose of Disbursement Non-federal candidate contribution		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) C. Dan Driscoll, 2020		Date of Disbursement MM / DD / YYYY 09 / 30 / 2020
Mailing Address P.O. Box 6		FEC Identification Number C [] Transaction ID : SB29.6221 Amount of Each Disbursement this Period [] 1000.00
City OYSTERVILLE	State WA	Zip Code 98641
Purpose of Disbursement Non-federal candidate contribution		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3500.00
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 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)
MISES PAC

A. Kalish Morrow for Hanford City Council 2020

Full Name (Last, First, Middle Initial)

Mailing Address 1963 Roland Drive

City Hanford State CA Zip Code 93230

Purpose of Disbursement Non-federal candidate contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 19 / 2020

FEC Identification Number: C

Transaction ID : SB29.6225

Amount of Each Disbursement this Period: 1500.00

Memo Item

B. Knebel for Bellevue City Council

Full Name (Last, First, Middle Initial)

Mailing Address 3413 Mirror Ln

City Bellevue State NE Zip Code 68123

Purpose of Disbursement Non-federal candidate contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB29.6247

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. Marcos Marrero, Libertarian for Osceola County Commission District 3

Full Name (Last, First, Middle Initial)

Mailing Address 118 Alcala Drive

City Kissimmee State FL Zip Code 34758

Purpose of Disbursement Non-federal candidate contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 19 / 2020

FEC Identification Number: C

Transaction ID : SB29.6227

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

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 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)
MISES PAC

Full Name (Last, First, Middle Initial) A. Sasha For Dekalb		Date of Disbursement MM / DD / YYYY 09 / 28 / 2020
Mailing Address 1019 W. Hillcrest Drive Apt 12		FEC Identification Number C Transaction ID : SB29.6246 Amount of Each Disbursement this Period 1500.00
City Dekalb	State IL	
Zip Code 60115		Memo Item <input type="checkbox"/>
Purpose of Disbursement Non-federal candidate contribution		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TRISHA BUTLER FOR CLARKSVILLE		Date of Disbursement MM / DD / YYYY 09 / 30 / 2020
Mailing Address 783 Cumberland Terrace		FEC Identification Number C Transaction ID : SB29.6249 Amount of Each Disbursement this Period 1500.00
City Clarksville	State TN	
Zip Code 37040		Memo Item <input type="checkbox"/>
Purpose of Disbursement Non-federal candidate contribution		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Victoria Reynolds 2020		Date of Disbursement MM / DD / YYYY 09 / 29 / 2020
Mailing Address 15185 Rainbow Drive		FEC Identification Number C Transaction ID : SB29.6231 Amount of Each Disbursement this Period 1500.00
City Sedalia	State CO	
Zip Code 80135		Memo Item <input type="checkbox"/>
Purpose of Disbursement Non-federal candidate contribution		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	12000.00