

# 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.   
John Bolton Super PAC

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (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)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy H. Watkins

Signature of Treasurer Nancy H. Watkins [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**John Bolton Super 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="2014"/>	<input type="text" value="455782.41"/>	<input type="text" value="455782.41"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2546478.59"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="451350.94"/>	<input type="text" value="2944559.81"/>
(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="2997829.53"/>	<input type="text" value="3400342.22"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="393623.25"/>	<input type="text" value="796135.94"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2604206.28"/>	<input type="text" value="2604206.28"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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. 06/2004)

Page 3

Write or Type Committee Name

**John Bolton Super PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 08 / 20 / 2014

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).....	334948.00	2815373.00
(ii) Unitemized .....	116235.18	118761.68
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	451183.18	2934134.68
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	451183.18	2944134.68
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.).....	167.76	425.13
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))..... ▶	451350.94	2944559.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	451350.94	2944559.81

**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 .....	353473.25	755985.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	353473.25	755985.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	34500.00	34500.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	5650.00	5650.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	393623.25	796135.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	393623.25	796135.94

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	451183.18	2944134.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	451183.18	2944134.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	353473.25	755985.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	353473.25	755985.94

**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 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Ms Suzanne Benoit**

Mailing Address 215 W Cherokee Ave

City Cartersville State GA Zip Code 30120

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

Name of Employer self-employed Occupation restaurateur

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2014  
**Transaction ID : SA11AI.10035**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 215 W Cherokee Ave

City Cartersville State GA Zip Code 30120

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

Name of Employer self-employed Occupation restaurateur

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2014  
**Transaction ID : SA11AI.12460**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2368 W County Road G

City Mercer State WI Zip Code 54547

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

Name of Employer n/a Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2014  
**Transaction ID : SA11AI.11823**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 55
<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Paul Breithaupt</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2014 <b>Transaction ID : SA11AI.10632</b>
Mailing Address 2025 Swan Drive		Amount of Each Receipt this Period 250.00
City Costa Mesa	State CA	Zip Code 92626
FEC ID number of contributing federal political committee. C	Name of Employer n/a	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Paul Breithaupt</b>		Date of Receipt MM / DD / YYYY 07 / 30 / 2014 <b>Transaction ID : SA11AI.4835</b>
Mailing Address 2025 Swan Drive		Amount of Each Receipt this Period 100.00
City Costa Mesa	State CA	Zip Code 92626
FEC ID number of contributing federal political committee. C	Name of Employer n/a	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Tucker Bridwell</b>		Date of Receipt MM / DD / YYYY 07 / 28 / 2014 <b>Transaction ID : SA11AI.4811</b>
Mailing Address P. O. Box 1616		Amount of Each Receipt this Period 10000.00
City Abilene	State TX	Zip Code 79604
FEC ID number of contributing federal political committee. C	Name of Employer Mansefeldt Investments	Occupation c.e.o.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 55
	<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)  
**John Bolton Super PAC**

**A. Mrs Rosemary Briggs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4711 Watauga Rd

City Dallas	State TX	Zip Code 75209
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Date of Receipt  
MM / DD / YYYY  
07 / 24 / 2014  
**Transaction ID : SA11AI.11349**

Amount of Each Receipt this Period  
2500.00

**B. Mrs Rosemary Briggs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4711 Watauga Rd

City Dallas	State TX	Zip Code 75209
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
MM / DD / YYYY  
07 / 30 / 2014  
**Transaction ID : SA11AI.10257**

Amount of Each Receipt this Period  
2500.00

**C. Philip Bronner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9530 Hageman Road, #B347

City Bakersfield	State CA	Zip Code 93312
FEC ID number of contributing federal political committee. C		
Name of Employer PRBMD, Inc.	Occupation physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2014  
**Transaction ID : SA11AI.4721**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5025.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 55
	<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)  
**John Bolton Super PAC**

**A. Mrs Marcheta Burlingham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Monterey Cir  
 City Corona Del Mar State CA Zip Code 92625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2014  
**Transaction ID : SA11AI.11974**  
 Amount of Each Receipt this Period  
 500.00

**B. Dr J Callahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Laurel Ln  
 City York State NE Zip Code 68467  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Chiropractic Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 14 / 2014  
**Transaction ID : SA11AI.12430**  
 Amount of Each Receipt this Period  
 250.00

**c. John K. Castle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1095 N. Ocean Blvd.  
 City Palm Beach State FL Zip Code 33480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Castle Harlan, Inc. Occupation banker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2014  
**Transaction ID : SA11AI.4857**  
 Amount of Each Receipt this Period  
 10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 55
	<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)  
**John Bolton Super PAC**

**A. Mr William Cooney Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12502 Sweet Leaf Ter  
 City State Zip Code  
 Fairfax VA 22033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Systems Engineer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 204.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 16 / 2014  
**Transaction ID : SA11AI.10419**  
 Amount of Each Receipt this Period  
 204.00

**B. Mr William Cooney Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12502 Sweet Leaf Ter  
 City State Zip Code  
 Fairfax VA 22033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Systems Engineer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2014  
**Transaction ID : SA11AI.10420**  
 Amount of Each Receipt this Period  
 151.00

**C. Mr James Costa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Marlette Dr  
 City State Zip Code  
 Carson City NV 89703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 n/a retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2014  
**Transaction ID : SA11AI.10113**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	605.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 55
	<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)  
**John Bolton Super PAC**

**A. Mr James Creacy**  
Full Name (Last, First, Middle Initial)

Mailing Address 2449 N Beachwood Dr Apt 9

City	State	Zip Code
Los Angeles	CA	90068

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

Name of Employer	Occupation
Nilene Beachwood Apartments	executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

**Transaction ID : SA11AI.10943**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4416 Elmwood Pkwy

City	State	Zip Code
Metairie	LA	70003

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

Name of Employer	Occupation
n/a	retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2014

**Transaction ID : SA11AI.10664**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3526 Arrowhead

City	State	Zip Code
Dallas	TX	75209

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

Name of Employer	Occupation
Crow Holdings	investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

**Transaction ID : SA11AI.4795**

Amount of Each Receipt this Period  
45000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 55
	<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)  
**John Bolton Super PAC**

**A. Mrs Beryl Dean**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 Conshohocken State Rd  
 City Bala Cynwyd State PA Zip Code 19004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014  
**Transaction ID : SA11AI.10238**  
 Amount of Each Receipt this Period  
**250.00**

**B. Miss Wilma Edwards**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 471  
 City Del Mar State CA Zip Code 92014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014  
**Transaction ID : SA11AI.13232**  
 Amount of Each Receipt this Period  
**250.00**

**C. Mr Robert Faulkner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3800 Fry Ave  
 City Tyler State TX Zip Code 75701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014  
**Transaction ID : SA11AI.10944**  
 Amount of Each Receipt this Period  
**250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Mr Theodore Fosdick</b>		Date of Receipt 08 / 01 / 2014 <b>Transaction ID : SA11AI.12797</b>
Mailing Address 5741 Jackson Rd		Amount of Each Receipt this Period 250.00
City Ann Arbor	State MI	Zip Code 48103
FEC ID number of contributing federal political committee. C	Name of Employer Omicron INC.	Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Sam Fox</b>		Date of Receipt 08 / 14 / 2014 <b>Transaction ID : SA11AI.4869</b>
Mailing Address 7701 Forsyth Blvd., #600		Amount of Each Receipt this Period 25000.00
City St. Louis	State MO	Zip Code 63105
FEC ID number of contributing federal political committee. C	Name of Employer Harbour Group	Occupation founder
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75000.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs Eunice Goodan</b>		Date of Receipt 07 / 21 / 2014 <b>Transaction ID : SA11AI.10961</b>
Mailing Address 2550 Aberdeen Ave		Amount of Each Receipt this Period 500.00
City Los Angeles	State CA	Zip Code 90027
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Housewife
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Grant Capital Fund, LLC</b>		Date of Receipt
Mailing Address 277 Park Avenue, 47th Floor		<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10172
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4854</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="100000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="100000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Mr Roy Grogan</b>		Date of Receipt
Mailing Address 12 Fossil Hill Rd		<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Weatherford	TX	76087
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.11613</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Lawyer	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Marilyn J. Hayden</b>		Date of Receipt
Mailing Address 10306 E. Calle De Las Brisas		<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
Scottsdale	AZ	85255
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4848</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
n/a	retired	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="101250.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Ms Shirley Henderson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 25 / 2014 <b>Transaction ID : SA11AI.12160</b>
Mailing Address PO Box 787		Amount of Each Receipt this Period 250.00
City Beavercreek	State OR	Zip Code 97004
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. Ms Shirley Henderson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 30 / 2014 <b>Transaction ID : SA11AI.12161</b>
Mailing Address PO Box 787		Amount of Each Receipt this Period 151.00
City Beavercreek	State OR	Zip Code 97004
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

Full Name (Last, First, Middle Initial) <b>C. Dr Jonathan Herbst</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 22 / 2014 <b>Transaction ID : SA11AI.10698</b>
Mailing Address 388 Westchester Ave		Amount of Each Receipt this Period 250.00
City Port Chester	State NY	Zip Code 10573
FEC ID number of contributing federal political committee. C	Name of Employer self-employed	Occupation physician
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	651.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 55  
(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)  
**John Bolton Super PAC**

**A. Mrs Carole Hinkle**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2515 Lockheed Dr  
City Midland State TX Zip Code 79701  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2014  
**Transaction ID : SA11AI.11174**  
Amount of Each Receipt this Period  
250.00

**B. Mr Raymond Huttig**  
Full Name (Last, First, Middle Initial)  
Mailing Address 639 28th St  
City San Francisco State CA Zip Code 94131  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 11 / 2014  
**Transaction ID : SA11AI.10626**  
Amount of Each Receipt this Period  
250.00

**C. Mrs Ferenc Kacsinta**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7323 Cartwright Ave  
City Sun Valley State CA Zip Code 91352  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 29 / 2014  
**Transaction ID : SA11AI.11928**  
Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 17 OF 55
<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Mrs Ferenc Kacsinta</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11AI.13073</b>
Mailing Address 7323 Cartwright Ave		Amount of Each Receipt this Period 500.00
City Sun Valley	State CA	Zip Code 91352
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mrs Judy Klein</b>		Date of Receipt MM / DD / YYYY 08 / 18 / 2014 <b>Transaction ID : SA11AI.13221</b>
Mailing Address 1106 Laurel Oak Rd Apt 251		Amount of Each Receipt this Period 250.00
City Voorhees	State NJ	Zip Code 08043
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Alice Konze</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2014 <b>Transaction ID : SA11AI.10176</b>
Mailing Address 7318 Riverhill Rd		Amount of Each Receipt this Period 500.00
City Oxon Hill	State MD	Zip Code 20745
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Mr Robert Krane</b>		Date of Receipt MM / DD / YYYY 07 / 28 / 2014 <b>Transaction ID : SA11AI.11918</b>
Mailing Address 11 Polo Field Ln		Amount of Each Receipt this Period 100.00
City Denver	State CO	Zip Code 80209
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs Herbert Lantinga</b>		Date of Receipt MM / DD / YYYY 08 / 04 / 2014 <b>Transaction ID : SA11AI.12605</b>
Mailing Address 7358 Cascade Rd SE		Amount of Each Receipt this Period 250.00
City Grand Rapids	State MI	Zip Code 49546
FEC ID number of contributing federal political committee. C		
Name of Employer Notions Marketing	Occupation marketing executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Ms Alice Lebewohl</b>		Date of Receipt MM / DD / YYYY 08 / 01 / 2014 <b>Transaction ID : SA11AI.12453</b>
Mailing Address 5500 Calle Real Bldg A129		Amount of Each Receipt this Period 1000.00
City Santa Barbara	State CA	Zip Code 93111
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Mr Jonnie Lebow</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 29 / 2014 <b>Transaction ID : SA11AI.10749</b>
Mailing Address 4637 W Thatcher Ln		Amount of Each Receipt this Period 51.00
City Lincoln	State NE	Zip Code 68528
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) <b>B. Edward Leede</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2014 <b>Transaction ID : SA11AI.4843</b>
Mailing Address 6400 S. Fiddler's Green, #2100		Amount of Each Receipt this Period 25000.00
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee.	C	
Name of Employer self-employed	Occupation investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs Robert Lindner Sr</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 18 / 2014 <b>Transaction ID : SA11AI.10225</b>
Mailing Address 3955 Montgomery Rd		Amount of Each Receipt this Period 250.00
City Cincinnati	State OH	Zip Code 45212
FEC ID number of contributing federal political committee.	C	
Name of Employer United Dairy Farmers	Occupation executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Mr Max Linn**

Mailing Address **PO Box 945**

City **Fort Sumner** State **NM** Zip Code **88119**

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

Name of Employer **self-employed** Occupation **rancher**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	4

**Transaction ID : SA11AI.10406**

Amount of Each Receipt this Period  

2	5	0	0	.	0	0
---	---	---	---	---	---	---

**250.00**

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

Mailing Address **PO Box 945**

City **Fort Sumner** State **NM** Zip Code **88119**

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

Name of Employer **self-employed** Occupation **rancher**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	4

**Transaction ID : SA11AI.12583**

Amount of Each Receipt this Period  

5	0	0	.	0	0
---	---	---	---	---	---

**50.00**

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

Mailing Address **29045 Livingston Dr**

City **Mechanicsville** State **MD** Zip Code **20659**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

**Transaction ID : SA11AI.11306**

Amount of Each Receipt this Period  

2	5	0	0	.	0	0
---	---	---	---	---	---	---

**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Mrs Laurie Mackey</b>		Date of Receipt 08 / 06 / 2014 <b>Transaction ID : SA11AI.13153</b>
Mailing Address 4396 Windlake Dr		Amount of Each Receipt this Period 100.00
City Niceville	State FL	Zip Code 32578
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs Laurie Mackey</b>		Date of Receipt 08 / 19 / 2014 <b>Transaction ID : SA11AI.13154</b>
Mailing Address 4396 Windlake Dr		Amount of Each Receipt this Period 50.00
City Niceville	State FL	Zip Code 32578
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Ms Sherrill Martinez</b>		Date of Receipt 07 / 15 / 2014 <b>Transaction ID : SA11AI.10658</b>
Mailing Address 981 S Clover Ave		Amount of Each Receipt this Period 240.00
City San Jose	State CA	Zip Code 95128
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	390.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 22 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

**A. Julia J. Matthews**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 176  
 City Abilene State TX Zip Code 79604  
 Date of Receipt 07 / 28 / 2014  
**Transaction ID : SA11AI.4813**  
 Amount of Each Receipt this Period 25000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer self-employed Occupation investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

**B. Mr Norman Merriam**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4212 Cliff St  
 City Laramie State WY Zip Code 82070  
 Date of Receipt 07 / 17 / 2014  
**Transaction ID : SA11AI.11972**  
 Amount of Each Receipt this Period 250.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer n/a Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

**C. Mr Gordon Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14289 W Shelley Ln  
 City Wadsworth State IL Zip Code 60083  
 Date of Receipt 07 / 01 / 2014  
**Transaction ID : SA11AI.11067**  
 Amount of Each Receipt this Period 500.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25750.00  
**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 23 OF 55
	<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)  
**John Bolton Super PAC**

**A. Henry Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 85 Round Hill Road

City Greenwich State CT Zip Code 06831

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

Name of Employer Marblegate Asset Management Occupation executive

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 / 01 / 2014

**Transaction ID : SA11AI.4840**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 241 Harpeth View Trl

City Kingston Springs State TN Zip Code 37082

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

Name of Employer n/a Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2014

**Transaction ID : SA11AI.10058**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 22025 E Highway 20

City Bend State OR Zip Code 97701

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.10328**

Amount of Each Receipt this Period  
250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Mr Jack Morrow</b>		Date of Receipt
Mailing Address 22025 E Highway 20		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bend	OR	97701
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.10329</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="51.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="301.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr Jack Morrow</b>		Date of Receipt
Mailing Address 22025 E Highway 20		<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bend	OR	97701
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.12554</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="351.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr Jack Morrow</b>		Date of Receipt
Mailing Address 22025 E Highway 20		<input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bend	OR	97701
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.12555</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="376.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="126.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Mrs Marie Morse</b>		Date of Receipt
Mailing Address 3025 Woodcliff Dr NW		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.10338</b>
Canton	OH	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="250.00"/>
Name of Employer	Occupation	
n/a	retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Dr Laurance Nilsen</b>		Date of Receipt
Mailing Address 7140 E Bronco Dr		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.12683</b>
Paradise Valley	AZ	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="1000.00"/>
Name of Employer	Occupation	
n/a	retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr George Pittinos</b>		Date of Receipt
Mailing Address 31904 Shoal Water Dr		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.12986</b>
Orange Beach	AL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="150.00"/>
Name of Employer	Occupation	
n/a	retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1400.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial) <b>A. Sarah Pyle</b>		Date of Receipt MM / DD / YYYY 07 / 23 / 2014 <b>Transaction ID : SA11AI.4775</b>
Mailing Address 3707 Gilbert Avenue		Amount of Each Receipt this Period 250.00
City Dallas	State TX	Zip Code 75219
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Thomas Rastin</b>		Date of Receipt MM / DD / YYYY 08 / 19 / 2014 <b>Transaction ID : SA11AI.4908</b>
Mailing Address 1240 Gambier Road		Amount of Each Receipt this Period 5000.00
City Mount Vernon	State OH	Zip Code 43050
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 5000.00
Name of Employer Ariel Corporation	Occupation vice-president	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth Resnik</b>		Date of Receipt MM / DD / YYYY 07 / 28 / 2014 <b>Transaction ID : SA11AI.11362</b>
Mailing Address 635 S Park Centre Ave Apt 1321		Amount of Each Receipt this Period 250.00
City Green Valley	State AZ	Zip Code 85614
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER: PAGE 27 OF 55  
(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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Miss Monte Richardson**

Mailing Address 29 Highbridge Xing Apt 3301

City Asheville	State NC	Zip Code 28803
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2014

**Transaction ID : SA11AI.12973**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1707 Jarvis St

City Raleigh	State NC	Zip Code 27608
-----------------	-------------	-------------------

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

Name of Employer n/a	Occupation homemaker
-------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2014

**Transaction ID : SA11AI.12848**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 11728 S Tongass Hwy

City Ketchikan	State AK	Zip Code 99901
-------------------	-------------	-------------------

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

Name of Employer Experience AK Tones	Occupation Inn Keeper
---	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

**Transaction ID : SA11AI.12835**

Amount of Each Receipt this Period  
**500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

**A. Mr John Slavik**  
Full Name (Last, First, Middle Initial)

Mailing Address 510 E Alexander Palm Rd

City	State	Zip Code
Boca Raton	FL	33432

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

Name of Employer	Occupation
Pinnable Holding of Florida	Real Estate Investment

Receipt For:  
 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 / 15 / 2014  
**Transaction ID : SA11AI.12302**

Amount of Each Receipt this Period  
 750.00

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

Mailing Address 400 Pine Street, #1000

City	State	Zip Code
Abilene	TX	79601

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

Name of Employer	Occupation
n/a	retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2014  
**Transaction ID : SA11AI.4815**

Amount of Each Receipt this Period  
 25000.00

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

Mailing Address 9999 Collins Ave Apt 14J

City	State	Zip Code
Bal Harbour	FL	33154

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

Name of Employer	Occupation
n/a	retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 11 / 2014  
**Transaction ID : SA11AI.12536**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	26250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 55
	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Donald J. Trump**

Mailing Address 725 5th Avenue

City New York State NY Zip Code 10022

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

Name of Employer self-employed Occupation investments

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
07 / 16 / 2014  
**Transaction ID : SA11AI.4738**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 595 S Race St

City Denver State CO Zip Code 80209

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

Name of Employer VW INC Occupation CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
07 / 10 / 2014  
**Transaction ID : SA11AI.10717**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 2590 Jackson Street

City San Francisco State CA Zip Code 94115

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

Name of Employer A. Wilsey Properties Co. Occupation c.e.o.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
08 / 14 / 2014  
**Transaction ID : SA11AI.4867**

Amount of Each Receipt this Period  
25000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32500.00

**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 30 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. Mr James Wintersteen**

Mailing Address 27 Myrtle Ave

City State Zip Code  
Mill Valley CA 94941

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014  
**Transaction ID : SA11AI.10695**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1240 Gambier Road

City State Zip Code  
Mount Vernon OH 43050

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

Name of Employer Occupation  
Ariel Corporation c.e.o.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2014  
**Transaction ID : SA11AI.4906**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	334948.00

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

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

FOR LINE NUMBER: PAGE 31 OF 55  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)  
**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.13

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014  
**Transaction ID : SA17.4839**

Amount of Each Receipt this Period  
 167.76

interest

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	167.76
<b>TOTAL</b> This Period (last page this line number only).....▶	167.76

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Allied Printing Resources**

Mailing Address 33 Commerce Street

City Carlstadt State NJ Zip Code 07072

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2014

Transaction ID : **SB21B.4893**

Amount of Each Disbursement this Period

1916.20

Full Name (Last, First, Middle Initial)

**B. Baker & Hostetler, LLP**

Mailing Address P. O. Box 70189

City Cleveland State OH Zip Code 44190

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2014

Transaction ID : **SB21B.4694**

Amount of Each Disbursement this Period

2275.00

Full Name (Last, First, Middle Initial)

**C. Baker & Hostetler, LLP**

Mailing Address P. O. Box 70189

City Cleveland State OH Zip Code 44190

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2014

Transaction ID : **SB21B.4874**

Amount of Each Disbursement this Period

1033.75

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

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

5224.95



**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Cambridge Analytica, LLC**

Mailing Address 1211 6th Avenue

City New York State NY Zip Code 10036

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2014

**Transaction ID : SB21B.4714**

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

**B. Campaign Solutions**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
website services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2014

**Transaction ID : SB21B.4696**

Amount of Each Disbursement this Period

12675.00

Full Name (Last, First, Middle Initial)

**C. Campaign Solutions**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
media solutions

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2014

**Transaction ID : SB21B.4781**

Amount of Each Disbursement this Period

293.00

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

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

37968.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Canon Financial Services, Inc.**

Mailing Address 14904 Collections Center Drive

City Chicago State IL Zip Code 60693

Purpose of Disbursement  
equipment rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : SB21B.4725**

Amount of Each Disbursement this Period

97.82

Full Name (Last, First, Middle Initial)

**B. Canon Financial Services, Inc.**

Mailing Address 14904 Collections Center Drive

City Chicago State IL Zip Code 60693

Purpose of Disbursement  
equipment rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2014

**Transaction ID : SB21B.4785**

Amount of Each Disbursement this Period

97.82

Full Name (Last, First, Middle Initial)

**C. Carey International**

Mailing Address 5300 Spectrum Drive, #D

City Frederick State MD Zip Code 21703

Purpose of Disbursement  
transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 19 / 2014

**Transaction ID : SB21B.4903**

Amount of Each Disbursement this Period

26.35

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

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

221.99

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. CD, Inc.**

Mailing Address P. O. Box 1877

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
online advertising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4695**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CD, Inc.**

Mailing Address P. O. Box 1877

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
voter data

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4786**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CD, Inc.**

Mailing Address P. O. Box 1877

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
online advertising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4875**

Amount of Each Disbursement this Period

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

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

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

Use separate schedule(s)  
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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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. CESC 1730 M Street, LLC**

Mailing Address P. O. Box 642773

City Pittsburgh State PA Zip Code 15264

Purpose of Disbursement  
office rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2014

**Transaction ID : SB21B.4677**

Amount of Each Disbursement this Period

2289.00

Full Name (Last, First, Middle Initial)

**B. CESC 1730 M Street, LLC**

Mailing Address P. O. Box 642773

City Pittsburgh State PA Zip Code 15264

Purpose of Disbursement  
office rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2014

**Transaction ID : SB21B.4793**

Amount of Each Disbursement this Period

5032.75

Full Name (Last, First, Middle Initial)

**C. CESC 1730 M Street, LLC**

Mailing Address P. O. Box 642773

City Pittsburgh State PA Zip Code 15264

Purpose of Disbursement  
office rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2014

**Transaction ID : SB21B.4837**

Amount of Each Disbursement this Period

2289.00

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

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

9610.75

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Colortree Group, Inc.**

Mailing Address 8000 Villa Park Drive

City Richmond State VA Zip Code 23228

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2014

**Transaction ID : SB21B.4894**

Amount of Each Disbursement this Period

1909.34

Full Name (Last, First, Middle Initial)

**B. Comcast**

Mailing Address P. O. Box 3005

City Southeastern State PA Zip Code 19398

Purpose of Disbursement  
telephone/internet

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2014

**Transaction ID : SB21B.4783**

Amount of Each Disbursement this Period

221.79

Full Name (Last, First, Middle Initial)

**C. Corporate Press, Inc.**

Mailing Address 9700 Philadelphia Court

City Lanham State MD Zip Code 20706

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 17 / 2014

**Transaction ID : SB21B.4890**

Amount of Each Disbursement this Period

8932.00

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

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

11063.13

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. DonorBureau**

Mailing Address 1900 N. Culpepper Street

City State Zip Code  
Arlington VA 22207

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 10 / 2014

**Transaction ID : SB21B.4886**

Amount of Each Disbursement this Period

1455.67

Full Name (Last, First, Middle Initial)

**B. DonorBureau**

Mailing Address 1900 N. Culpepper Street

City State Zip Code  
Arlington VA 22207

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 17 / 2014

**Transaction ID : SB21B.4891**

Amount of Each Disbursement this Period

489.55

Full Name (Last, First, Middle Initial)

**C. DonorBureau**

Mailing Address 1900 N. Culpepper Street

City State Zip Code  
Arlington VA 22207

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 24 / 2014

**Transaction ID : SB21B.4895**

Amount of Each Disbursement this Period

583.98

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

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

2529.20

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4703**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4845**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. First Virginia Community Bank**

Mailing Address 11325 Random Hills Road  
Suite 240

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4921**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Global Payments**

Mailing Address 10705 Red Run Blvd.

City State Zip Code  
Rockville MD 20855

Purpose of Disbursement  
credit card fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4922**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Mark Groombridge**

Mailing Address 2201 North Street, N.W., #412

City State Zip Code  
Washington DC 20037

Purpose of Disbursement  
office supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4873**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Hilltop Consultants, Inc.**

Mailing Address 4201 Connecticut Ave., N.W., #500

City State Zip Code  
Washington DC 20008

Purpose of Disbursement  
tech support

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4784**

Amount of Each Disbursement this Period

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

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Holloway Consulting, Inc.**

Mailing Address 2300 Clarendon Blvd., #1306

City State Zip Code  
Arlington VA 22201

Purpose of Disbursement  
fundraising consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2014

**Transaction ID : SB21B.4870**

Amount of Each Disbursement this Period

12131.25

Full Name (Last, First, Middle Initial)

**B. HSP Direct**

Mailing Address 20130 Lakeview Center Plaza, #300

City State Zip Code  
Ashburn VA 20147

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2014

**Transaction ID : SB21B.4892**

Amount of Each Disbursement this Period

19895.00

Full Name (Last, First, Middle Initial)

**C. HSP Direct**

Mailing Address 20130 Lakeview Center Plaza, #300

City State Zip Code  
Ashburn VA 20147

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 07 / 2014

**Transaction ID : SB21B.4915**

Amount of Each Disbursement this Period

8212.40

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

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

40238.65

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. iDONATEpro**

Mailing Address 2033 San Elijo Avenue, #203

City State Zip Code  
Cardiff by the Sea CA 92007

Purpose of Disbursement  
software

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2014

**Transaction ID : SB21B.4782**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**B. iDONATEpro**

Mailing Address 2033 San Elijo Avenue, #203

City State Zip Code  
Cardiff by the Sea CA 92007

Purpose of Disbursement  
software

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2014

**Transaction ID : SB21B.4872**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**C. MDI Imaging & Mail**

Mailing Address 21955 Cascades Parkway

City State Zip Code  
Dulles VA 20166

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : SB21B.4896**

Amount of Each Disbursement this Period

4955.56

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

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

5555.56

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Nova List Company, LLC**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
list rental/maintenance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2014

Transaction ID : **SB21B.4897**

Amount of Each Disbursement this Period

5005.99

Full Name (Last, First, Middle Initial)

**B. Nova List Company, LLC**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
list rental/maintenance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2014

Transaction ID : **SB21B.4898**

Amount of Each Disbursement this Period

14676.90

Full Name (Last, First, Middle Initial)

**C. Postage for Direct Mail Fundraising**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2014

Transaction ID : **SB21B.4901**

Amount of Each Disbursement this Period

12975.00

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

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

32657.89

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Postage for Direct Mail Fundraising**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2014

**Transaction ID : SB21B.4887**

Amount of Each Disbursement this Period

634.34

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Postage for Direct Mail Fundraising**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2014

**Transaction ID : SB21B.4861**

Amount of Each Disbursement this Period

38925.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Robert Watkins & Company, P.A.**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2014

**Transaction ID : SB21B.4697**

Amount of Each Disbursement this Period

8446.38

Category/  
Type

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

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

48005.72

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Sisk Mailing Service**

Mailing Address 203 Log Canoe Circle

City State Zip Code  
Stevensville MD 21666

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : SB21B.4888**

Amount of Each Disbursement this Period

3022.53

Full Name (Last, First, Middle Initial)

**B. Sisk Mailing Service**

Mailing Address 203 Log Canoe Circle

City State Zip Code  
Stevensville MD 21666

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2014

**Transaction ID : SB21B.4918**

Amount of Each Disbursement this Period

1726.18

Full Name (Last, First, Middle Initial)

**C. Sunrise Data Services**

Mailing Address 20130 Lakeview Center Plaza, #300

City State Zip Code  
Ashburn VA 20147

Purpose of Disbursement  
list rental/maintenance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : SB21B.4889**

Amount of Each Disbursement this Period

2797.93

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

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

7546.64

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Sunrise Data Services**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2014

**Transaction ID : SB21B.4916**

Amount of Each Disbursement this Period

590.00

Full Name (Last, First, Middle Initial)

**B. Sunrise Data Services**

Mailing Address 20130 Lakeview Center Plaza, #300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2014

**Transaction ID : SB21B.4917**

Amount of Each Disbursement this Period

180.00

Full Name (Last, First, Middle Initial)

**C. Sarah Tinsley**

Mailing Address 4039 Mansion Drive, N.W.

City Washington State DC Zip Code 20007

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2014

**Transaction ID : SB21B.4902**

Amount of Each Disbursement this Period

12000.00

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

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

12770.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Sarah Tinsley**

Mailing Address 4039 Mansion Drive, N.W.

City Washington State DC Zip Code 20007

Purpose of Disbursement  
travel/office supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2014

**Transaction ID : SB21B.4779**

Amount of Each Disbursement this Period

188.92

Full Name (Last, First, Middle Initial)

**B. Sarah Tinsley**

Mailing Address 4039 Mansion Drive, N.W.

City Washington State DC Zip Code 20007

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 29 / 2014

**Transaction ID : SB21B.4832**

Amount of Each Disbursement this Period

112.50

Full Name (Last, First, Middle Initial)

**C. Sarah Tinsley**

Mailing Address 4039 Mansion Drive, N.W.

City Washington State DC Zip Code 20007

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2014

**Transaction ID : SB21B.4860**

Amount of Each Disbursement this Period

10000.00

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

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

10301.42

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Tri-State Envelope Corporation**

Mailing Address P. O. Box 443

City State Zip Code  
Beltsville MD 20704

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : SB21B.4899**

Amount of Each Disbursement this Period

6227.82

Full Name (Last, First, Middle Initial)

**B. United Business Technologies**

Mailing Address 9218 Gaither Road

City State Zip Code  
Gaithersburg MD 20877

Purpose of Disbursement  
copies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : SB21B.4724**

Amount of Each Disbursement this Period

243.95

Full Name (Last, First, Middle Initial)

**C. United Business Technologies**

Mailing Address 9218 Gaither Road

City State Zip Code  
Gaithersburg MD 20877

Purpose of Disbursement  
copies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2014

**Transaction ID : SB21B.4871**

Amount of Each Disbursement this Period

195.29

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

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

6667.06



**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Visa**

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement  
see memo entries

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2014

**Transaction ID : SB21B.4794**

Amount of Each Disbursement this Period

1954.87

Full Name (Last, First, Middle Initial)

**B. Microsoft**

Mailing Address 1 Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement  
software

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 14 / 2014

**Transaction ID : SB21B.4794.2**

Amount of Each Disbursement this Period

30.18

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Hilltop Consultants, Inc.**

Mailing Address 4201 Connecticut Ave., N.W., #500

City Washington State DC Zip Code 20008

Purpose of Disbursement  
office equipment

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : SB21B.4794.3**

Amount of Each Disbursement this Period

543.55

**[MEMO ITEM]**

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

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

1954.87

**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"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

**A. Office Movers, Inc.**

Mailing Address 6500 Kane Way

City Elkridge State MD Zip Code 21075

Purpose of Disbursement  
moving services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SB21B.4794.4

Amount of Each Disbursement this Period

596.50
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Cort Business Services**

Mailing Address 5432 W. Chester Road

City West Chester State OH Zip Code 45069

Purpose of Disbursement  
furniture rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	02	/	2014

Transaction ID : SB21B.4794.5

Amount of Each Disbursement this Period

289.70
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Carey International**

Mailing Address 5300 Spectrum Drive, #D

City Frederick State MD Zip Code 21703

Purpose of Disbursement  
transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	18	/	2014

Transaction ID : SB21B.4794.8

Amount of Each Disbursement this Period

313.85
--------

[MEMO ITEM]

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

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

0.00
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353383.25
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**John Bolton Super PAC**

Full Name (Last, First, Middle Initial)

### A. Bolton for New Hampshire

Mailing Address 581 North West Road

City Canterbury State HI Zip Code 03224

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 M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2014

Transaction ID : SB29.4790

Amount of Each Disbursement this Period

5500.00
---------

Full Name (Last, First, Middle Initial)

### B.

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

Amount of Each Disbursement this Period

--

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

Amount of Each Disbursement this Period

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

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

5500.00
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5500.00
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
John Bolton Super PAC
FEC IDENTIFICATION NUMBER
C C00542464
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
CD, Inc.
Mailing Address
P. O. Box 1877
City
Alexandria State
VA Zip Code
22313
Purpose of Expenditure
online media placement
Category/Type
Name of Federal Candidate
Ann McLane Kuster
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
4864.00

Date of Public Distribution/Dissemination
07 / 17 / 2014
Amount
4864.00
Transaction ID : SE.4768
Date of Disbursement or Obligation
07 / 11 / 2014
Office Sought: House District: 02
State: NH
Disbursement For: General
2014 Other (specify)

Full Name of Payee
CD, Inc.
Mailing Address
P. O. Box 1877
City
Alexandria State
VA Zip Code
22313
Purpose of Expenditure
online media placement
Category/Type
Name of Federal Candidate
Ann McLane Kuster
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
8580.48

Date of Public Distribution/Dissemination
07 / 21 / 2014
Amount
3716.48
Transaction ID : SE.4769
Date of Disbursement or Obligation
07 / 11 / 2014
Office Sought: House District: 02
State: NH
Disbursement For: General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 8580.48
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Nancy H. Watkins [Electronically Filed] Date 08 / 28 / 2014

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

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CD, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 23 / 2014</b>
Mailing Address <b>P. O. Box 1877</b>	Amount <span style="border: 1px solid black; padding: 2px;">3974.00</span>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22313</b>	<b>Transaction ID : SE.4816</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 11 / 2014</b>
Purpose of Expenditure online media placement	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate <b>Ann McLane Kuster</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">12554.48</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>CD, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 24 / 2014</b>
Mailing Address <b>P. O. Box 1877</b>	Amount <span style="border: 1px solid black; padding: 2px;">3974.00</span>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22313</b>	<b>Transaction ID : SE.4817</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 11 / 2014</b>
Purpose of Expenditure online media placement	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate <b>Ann McLane Kuster</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16528.48</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">7948.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*Nancy H. Watkins* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**08 / 28 / 2014**

Signature \_\_\_\_\_

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

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CD, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 25 / 2014</b>
Mailing Address <b>P. O. Box 1877</b>	Amount <span style="border: 1px solid black; padding: 2px;">3000.00</span>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22313</b>	<b>Transaction ID : SE.4818</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 11 / 2014</b>
Purpose of Expenditure online media placement	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate <b>Ann McLane Kuster</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3000.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>CD, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 26 / 2014</b>
Mailing Address <b>P. O. Box 1877</b>	Amount <span style="border: 1px solid black; padding: 2px;">5543.61</span>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22313</b>	<b>Transaction ID : SE.4824</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 11 / 2014</b>
Purpose of Expenditure online media placement	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate <b>Ann McLane Kuster</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">22072.09</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">8543.61</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*Nancy H. Watkins* [Electronically Filed]

Signature \_\_\_\_\_ Date M M M / D D D / Y Y Y Y Y Y **08 / 28 / 2014**

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

NAME OF COMMITTEE (In Full) <b>John Bolton Super PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>CD, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 28 / 2014</b>
Mailing Address P. O. Box 1877	Amount <b>4927.91</b>
City Alexandria	State VA
Zip Code 22313	<b>Transaction ID : SE.4825</b>
Purpose of Expenditure online media placement	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 11 / 2014</b>
Category/Type	Name of Federal Candidate Ann McLane Kuster
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>27000.00</b>	

Full Name of Payee <b>CD, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 17 / 2014</b>
Mailing Address P. O. Box 1877	Amount <b>4500.00</b>
City Alexandria	State VA
Zip Code 22313	<b>Transaction ID : SE.4767</b>
Purpose of Expenditure media production	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 23 / 2014</b>
Category/Type	Name of Federal Candidate Ann McLane Kuster
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>31500.00</b>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>9427.91</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<b>34500.00</b>

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

*Nancy H. Watkins*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**08 / 28 / 2014**