

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

MIKE BOST FOR CONGRESS COMMITTEE

ADDRESS (number and street)

PO BOX 1212

Check if different than previously reported. (ACC)

MURPHYSBORO

IL

62966-1212

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00546499

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

IL

12

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)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

06

28

2022

in the State of

IL

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2022

through

06

08

2022

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

PITTMAN, DEBBIE, , ,

Type or Print Name of Treasurer

PITTMAN, DEBBIE, , ,

Signature of Treasurer

[Electronically Filed]

Date

06

16

2022

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

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
MIKE BOST FOR CONGRESS COMMITTEE

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	77596.20	1043477.05
(b) Total Contribution Refunds (from Line 20(d))	0.00	4100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	77596.20	1039377.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	110848.89	616082.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	7709.43
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	110848.89	608373.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	866478.09	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 05/2016)

Write or Type Committee Name

MIKE BOST FOR CONGRESS COMMITTEE

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	31637.00	446887.69
(ii) Unitemized	5059.20	76214.36
(iii) TOTAL of contributions from individuals	36696.20	523102.05
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	40900.00	520375.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	77596.20	1043477.05
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	14413.15	15723.44
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	7709.43
15. OTHER RECEIPTS (Dividends, Interest, etc.)	222.37	346.46
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	92231.72	1067256.38

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	110848.89	616082.44
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3550.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	550.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4100.00
21. OTHER DISBURSEMENTS	11000.00	55025.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	121848.89	675207.44

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	896095.26
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	92231.72
25. SUBTOTAL (add Line 23 and Line 24).....	988326.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	121848.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	866478.09

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 93	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
AHLEMEYER, DENISE, D., MS.,

Mailing Address 1119 SAINT BARTHOLOMEW DR

City CAHOKIA	State IL	Zip Code 62206-1442
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : A280AF70CB17E46E9A29

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
ALDAG, LOUIS, J., MR.,

Mailing Address 2417 OLD UNION RD

City MOUNT VERNON	State IL	Zip Code 62864-2850
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FEC ID number of contributing federal political committee.

Name of Employer ALDAG & ASSOCIATES LTD	Occupation ACCOUNTANT
--	--------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : A4BD83BE1A7BA423BA7E

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
ARBEITER, WILLARD, V., MR.,

Mailing Address 1308 NEUNERT RD

City GORHAM	State IL	Zip Code 62940-2405
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FEC ID number of contributing federal political committee.

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : AC4C74D8396CD476D809

Amount of Each Receipt this Period

Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 6 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
BARON, DAWN, E., MRS.,
Mailing Address 613 PORTSMITH PLACE DR.
City O FALLON State IL Zip Code 62269-7061
FEC ID number of contributing federal political committee. C
Name of Employer NONE Occupation RETIRED
Receipt For: 2022
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2022
Transaction ID : A3AF41C37574D410B83F
Amount of Each Receipt this Period
100.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
BIGHAM, DONNA, K., MS.,
Mailing Address 14327 MCRAVEN LN
City MOUNT VERNON State IL Zip Code 62864-6732
FEC ID number of contributing federal political committee. C
Name of Employer NONE Occupation RETIRED
Receipt For: 2022
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2022
Transaction ID : AB46AC922AF76400DA9C
Amount of Each Receipt this Period
250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
BRAMMEIER, ERIC, , MR.,
Mailing Address 7625 COUNTY HWY
City ADDIEVILLE State IL Zip Code 62214
FEC ID number of contributing federal political committee. C
Name of Employer SELF EMPLOYED Occupation FARMER
Receipt For: 2022
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2022
Transaction ID : A3446578F931E45629F4
Amount of Each Receipt this Period
250.00
 Memo Item

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

600.00

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

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

FOR LINE NUMBER: PAGE 7 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
BROCK, MARSHA, E, MRS.,
Mailing Address 7604 BAILEY LN

City DU QUOIN State IL Zip Code 62832-3409

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2022

Transaction ID : **A499C269F2202467CA0D**

Amount of Each Receipt this Period
 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BROCK, MARSHA, E, MRS.,
Mailing Address 7604 BAILEY LN

City DU QUOIN State IL Zip Code 62832-3409

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2022

Transaction ID : **A0B3866295FBC4C11895**

Amount of Each Receipt this Period
 25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BUSBY, DAVID, E, MR.,
Mailing Address PO BOX 1025

City MOUNT VERNON State IL Zip Code 62864-0022

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2022

Transaction ID : **AD897C61C899F4AB8A22**

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 625.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CAMERON, CHARLIE, , ,
 Mailing Address 13 MALLARD DR
 City NASHVILLE State IL Zip Code 62263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CLIFTON LARSON ALLEN LLC Occupation PRINCIPAL
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2022
Transaction ID : AE23946E0E86140F5AF0
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
CARD, BRAD, , ,
 Mailing Address 15356 FIDDLESTICKS BLVD
 City FORT MYERS State FL Zip Code 33912-3925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARD & ASSOCIATES Occupation PRINCIPAL
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2022
Transaction ID : A6363B8E2A8104166A74
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
CARRELL, MARGIE, A., MS.,
 Mailing Address 16679 E LIBERTY RD
 City MOUNT VERNON State IL Zip Code 62864-7518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 13 / 2022
Transaction ID : AB34346EA85544A0496F
 Amount of Each Receipt this Period
 100.00
 Memo Item

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 93	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
DROSTE, DAVID, , ,

Mailing Address 19147 STATE RT 15

City NASHVILLE	State IL	Zip Code 62263-5017
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation FARMER
-----------------------------------	----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2022

Transaction ID : A349F31BA012947D2B40

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
EARLEY, MICHAEL, , ,

Mailing Address 410 WEST 4TH STREET

City O FALLON	State IL	Zip Code 62269
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 202.47

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2022

Transaction ID : A98E1FCE1BFA74C1EAE0

Amount of Each Receipt this Period
 _____ 25.00

Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 24636.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2022

Transaction ID : A03540C7C14F34C7F8D8

Amount of Each Receipt this Period
 _____ 25.00

Memo Item
 INTERMEDIARY
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 275.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 10 OF 93
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
EARLEY, MICHAEL, , ,

Mailing Address **410 WEST 4TH STREET**

City **O FALLON** State **IL** Zip Code **62269**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
219.47

Date of Receipt
05 / 18 / 2022

Transaction ID : AB3648F35421B4578A46

Amount of Each Receipt this Period
17.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219-1891**

FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
24636.80

Date of Receipt
05 / 23 / 2022

Transaction ID : A981F8BA2230245BE93E

Amount of Each Receipt this Period
17.00

Memo Item
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
ENGLAND, DAVID, , MR.,

Mailing Address **1400 N GOLDEN ROD DR**

City **MARION** State **IL** Zip Code **62959-5916**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
05 / 23 / 2022

Transaction ID : AAB10ED6AFE7E4501A3A

Amount of Each Receipt this Period
300.00

Memo Item

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

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

317.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 93
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
GHENT, BILL, , MR., JR.

Mailing Address 201 E STATE ST

City HARRISBURG State IL Zip Code 62946-2710

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

Name of Employer Occupation
BILL GHENT, INC. INSURANCE AGENT/BROKER

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 27 2022

Transaction ID : **A8279CCECB23D44389B6**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GONZALEZ, MELVA, , ,

Mailing Address 16 LAKE INDIAN HILLS RIDGE

City CARBONDALE State IL Zip Code 62902

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 31 2022

Transaction ID : **A0683763D50C942E8A34**

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
24636.80

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 31 2022

Transaction ID : **A0D88F70B99854BE4942**

Amount of Each Receipt this Period
25.00

Memo Item
INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 1025.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 93
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
GORTON, BYRON, J., DR.,

Mailing Address 1205 TANGLEWOOD TRCE

City O FALLON State IL Zip Code 62269-3112

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

Name of Employer HSHS MEDICAL GROUP Occupation PHYSICIAN

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2022

Transaction ID : **A131745050C914311869**

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GUINNIP, DONALD, , MR.,

Mailing Address 18499 N GUINNIP RD

City MARSHALL State IL Zip Code 62441-3809

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 23 / 2022

Transaction ID : **A89B023D7024E40ACBD8**

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HALTERMAN, CHARLES, T., MR.,

Mailing Address 102 APPLE LN

City ANNA State IL Zip Code 62906-1114

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 20 / 2022

Transaction ID : **A5D2C20682F0D45DAB51**

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
HECKERT, BRIAN, D., MR.,
Mailing Address 4942 BLACK DIAMOND RD.

City: NASHVILLE State: IL Zip Code: 62263-5410

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

Name of Employer: FINANCIAL SOLUTIONS MIDWEST Occupation: WEALTH MANAGER

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2900.00

Date of Receipt: 06 / 01 / 2022
Transaction ID : AA3021AEAAA842FB9C7

Amount of Each Receipt this Period: 2900.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HECKERT, MARY, , MRS.,
Mailing Address 4942 BLACK DIAMOND RD.

City: NASHVILLE State: IL Zip Code: 62263-5410

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

Name of Employer: SELF EMPLOYED Occupation: BAR OWNER

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt: 06 / 01 / 2022
Transaction ID : AF659D97423F84166B3A

Amount of Each Receipt this Period: 2100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HOLLAND, BRUCE, B., MR.,
Mailing Address 4495 N ILLINOIS ST

City: SWANSEA State: IL Zip Code: 62226-1005

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

Name of Employer: HOLLAND CONSTRUCTION SERVICE Occupation: CEO

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Date of Receipt: 05 / 18 / 2022
Transaction ID : A535EDC54BE904E0A8CE

Amount of Each Receipt this Period: 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 5250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 93	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
HURSEY, GARY, , ,

Mailing Address 1221 TRAILWOOD COURT

City O FALLON	State IL	Zip Code 62269
------------------	-------------	-------------------

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

Name of Employer TELECOM DIRECT, LLC	Occupation TELECOM
---	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2022

Transaction ID : A35D31AB6C7FC494C996

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
24636.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2022

Transaction ID : A5D4D4CC7227246F4845

Amount of Each Receipt this Period
100.00

Memo Item
INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
HURSEY, GARY, , ,

Mailing Address 1221 TRAILWOOD COURT

City O FALLON	State IL	Zip Code 62269
------------------	-------------	-------------------

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

Name of Employer TELECOM DIRECT, LLC	Occupation TELECOM
---	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2022

Transaction ID : A74B9EF6CFB534559B78

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
WINRED
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 24636.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2022
Transaction ID : AA18A65D5C21243948B3
 Amount of Each Receipt this Period
 100.00
 Memo Item
 INTERMEDIARY
 TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
KABAT, MICHAEL, J., MR.,
 Mailing Address 6988 SHAMROCK RD
 City TAMAROA State IL Zip Code 62888-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2022
Transaction ID : A33DCC19A6C9A4A47B0F
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

C. Full Name (Last, First, Middle Initial)
WINRED
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 24636.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2022
Transaction ID : A136B2B3DBC674CE2BFB
 Amount of Each Receipt this Period
 25.00
 Memo Item
 INTERMEDIARY
 TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED.

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

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 93	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
KEMPER, JAMES, , ,

Mailing Address 521 JANNEYS LANE

City ALEXANDRIA	State VA	Zip Code 22302
--------------------	-------------	-------------------

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

Name of Employer LEGAL SERVICES CORPORATION	Occupation COUNSEL
--	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2022

Transaction ID : **A019DD2491B404B7CA65**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KIRCHNER, KAREN, S., MRS.,

Mailing Address 1682 W WILLOWBROOK DR

City NASHVILLE	State IL	Zip Code 62263-1392
-------------------	-------------	------------------------

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

Name of Employer NOTS LOGISTICS	Occupation EXECUTIVE ASSISTANT
------------------------------------	-----------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 13 / 2022

Transaction ID : **A0FCB9BBBC6E7467BAAF**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KIRCHNER, KAREN, S., MRS.,

Mailing Address 1682 W WILLOWBROOK DR

City NASHVILLE	State IL	Zip Code 62263-1392
-------------------	-------------	------------------------

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

Name of Employer NOTS LOGISTICS	Occupation EXECUTIVE ASSISTANT
------------------------------------	-----------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2022

Transaction ID : **A2F3AAF67B9D8431DAFC**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	1500.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: (check only one)		PAGE 17 OF 93	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
KOENIG, VICTOR, S, MR.,

Mailing Address 404 WINTERS LN

City MURPHYSBORO	State IL	Zip Code 62966-6145
---------------------	-------------	------------------------

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

Name of Employer VIC KOENIG CHEVROLET, INC.	Occupation AUTO DEALER
--	---------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3050.00

Date of Receipt

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

Transaction ID : A267FBF9E14044D238C7

Amount of Each Receipt this Period
500.00

Memo Item

SEE REDESIGNATION BELOW

B. Full Name (Last, First, Middle Initial)
KOENIG, VICTOR, S, MR.,

Mailing Address 404 WINTERS LN

City MURPHYSBORO	State IL	Zip Code 62966-6145
---------------------	-------------	------------------------

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

Name of Employer VIC KOENIG CHEVROLET, INC.	Occupation AUTO DEALER
--	---------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2022

Transaction ID : A2865584723F746D99EE

Amount of Each Receipt this Period
- 400.00

Memo Item

REDESIGNATION FROM

C. Full Name (Last, First, Middle Initial)
KOENIG, VICTOR, S, MR.,

Mailing Address 404 WINTERS LN

City MURPHYSBORO	State IL	Zip Code 62966-6145
---------------------	-------------	------------------------

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

Name of Employer VIC KOENIG CHEVROLET, INC.	Occupation AUTO DEALER
--	---------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2022

Transaction ID : AF4FBD3A476DB4CF6805

Amount of Each Receipt this Period
400.00

Memo Item

REDESIGNATION TO

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 93
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
KOLBER, VINCENT, A., MR.,

Mailing Address 70 W MADISON ST
STE 2200

City CHICAGO State IL Zip Code 60602-4383

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

Name of Employer RESIDCO Occupation CHAIRMAN

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 07 / 2022

Transaction ID : **A7C95FFD1A8E54A2CBEC**

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LEGRAND, SIDNEY, W., MR.,

Mailing Address 136 WOODBOURNE CT

City O FALLON State IL Zip Code 62269-7014

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

Name of Employer GONZALEZ COMPANIES, LLC Occupation CIVIL ENGINEER

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2022

Transaction ID : **AAB122ED34A134613B0F**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LESSLEY, NORRIS, B, MR., II

Mailing Address 9432 STATE ROUTE 154

City BALDWIN State IL Zip Code 62217-1338

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2022

Transaction ID : **A85DFD4CFE0C94C1EA35**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2350.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 93
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
LOJACONO, GREGORY, , MR.,

Mailing Address 2407 PRO TOUR DR

City: BELLEVILLE State: IL Zip Code: 62220-4853

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 13 / 2022

Transaction ID : **A6C78E02F1F0F44F6A94**

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City: ARLINGTON State: VA Zip Code: 22219-1891

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
24636.80

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 18 / 2022

Transaction ID : **A0E7024D8B9EE403D9F3**

Amount of Each Receipt this Period
50.00

Memo Item
INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
LOJACONO, GREGORY, , MR.,

Mailing Address 2407 PRO TOUR DR

City: BELLEVILLE State: IL Zip Code: 62220-4853

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2022

Transaction ID : **AF48676C97A2342E3B40**

Amount of Each Receipt this Period
100.00

Memo Item

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

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

150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 20 OF 93	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
LOJACONO, GREGORY, , MR.,

Mailing Address 2407 PRO TOUR DR

City BELLEVILLE	State IL	Zip Code 62220-4853
--------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2022

Transaction ID : A51883224F2254F79BB3

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
24636.80

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2022

Transaction ID : A447EE9ED0C05466BB8A

Amount of Each Receipt this Period
50.00

Memo Item
INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
MAROTTE, STEPHEN, , ,

Mailing Address 1209 CLARENDON DRIVE

City O FALLON	State IL	Zip Code 62269
------------------	-------------	-------------------

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

Name of Employer PERATON	Occupation SYSTEMS ENGINEER
-----------------------------	--------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2022

Transaction ID : AFFE95FCB9EF74F83A59

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 21 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
WINRED
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 24636.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2022
Transaction ID : A6FEB08DF3E4D421B8C0
 Amount of Each Receipt this Period
 25.00
 Memo Item
 INTERMEDIARY
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
MAROTTE, STEPHEN, , ,
 Mailing Address 1209 CLARENDON DRIVE
 City O FALLON State IL Zip Code 62269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PERATON SYSTEMS ENGINEER
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2022
Transaction ID : AB04B568E5C964D3E9F0
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

C. Full Name (Last, First, Middle Initial)
WINRED
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 24636.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2022
Transaction ID : A937440E18554430EA15
 Amount of Each Receipt this Period
 25.00
 Memo Item
 INTERMEDIARY
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

25.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)				PAGE 22 OF 93	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/>	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/>	<input type="checkbox"/>

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)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
MCDONALD, JOHN, , ,

Mailing Address 2623 PIPERS CT

City BELLEVILLE	State IL	Zip Code 62221-3481
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2020 2021 2022 2023

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	10	/	2022

Transaction ID : **A9DEA2198B2B44AB1AFD**

Amount of Each Receipt this Period
 0.00 100.00 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCKEE, BARBARA, BAKER, MRS.,

Mailing Address 5 SIGNAL PT

City BELLEVILLE	State IL	Zip Code 62223-1233
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FEC ID number of contributing federal political committee. **C**

Name of Employer R. CRAIG MCKEE MD	Occupation OFFICE MANAGER
---------------------------------------	------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2020 2021 2022 2023

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	23	/	2022

Transaction ID : **A8B7FD98B2F884588B86**

Amount of Each Receipt this Period
 0.00 100.00 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MEYER, DAVID, , MR.,

Mailing Address 12567 BEAVER CREEK RD

City NASHVILLE	State IL	Zip Code 62263-2507
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2020 2021 2022 2023

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	01	/	2022

Transaction ID : **ACF39A71A01A4470C90A**

Amount of Each Receipt this Period
 0.00 250.00 500.00

Memo Item

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

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

450.00 500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 23 OF 93	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
MIKKELSON, JANET, B., ,

Mailing Address 1385 WEIL RD

City LEBANON	State IL	Zip Code 62254-1809
-----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 31 / 2022

Transaction ID : **A7A0B8EC104314E2A9A1**

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NORTON, MELINDA, K., MRS.,

Mailing Address 17700 E 1050TH RD

City MARSHALL	State IL	Zip Code 62441-5201
------------------	-------------	------------------------

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

Name of Employer LARRY PAUL LTD	Occupation MANAGER
------------------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : **A7A702877136C489EAE C**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PEDTKE, TIM, , MR.,

Mailing Address 25199 N CAROLINA RD

City ASHLEY	State IL	Zip Code 62808-2744
----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : **A73CA411AA63A40258BB**

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 93	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
POETTKER, AMANDA, , MRS.,

Mailing Address 6409 PROVIDENCE FARM LN
APT 7101

City CHARLOTTE State NC Zip Code 28277-7245

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

Name of Employer TRUGREEN Occupation REGIONAL COMMERCIAL ACCOUNT SUPEF

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2022

Transaction ID : **AB343E476EB9D473E80B**

Amount of Each Receipt this Period
2900.00

Memo Item

B. Full Name (Last, First, Middle Initial)
POETTKER, KEITH, C., ,

Mailing Address 6409 PROVIDENCE FARM LN
APT 7101

City CHARLOTTE State NC Zip Code 28277-7245

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

Name of Employer POETTKER CONSTRUCTION COMPANY Occupation EXECUTIVE

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2022

Transaction ID : **A7E273C1F0BB946B6ABD**

Amount of Each Receipt this Period
2900.00

Memo Item

C. Full Name (Last, First, Middle Initial)
POLETE, PAUL, C., MR.,

Mailing Address 1 BUENA VISTA DR

City MURPHYSBORO State IL Zip Code 62966-3005

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

Name of Employer PLP BATTERY SUPPLY COMPANY Occupation OWNER

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 08 / 2022

Transaction ID : **AD02616ECC8204A1FB68**

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6100.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 25 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
POWLESS, DAVID, G, MR.,
 Mailing Address 1504 BRYAN DR
 City MARION State IL Zip Code 62959-1460
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 KEMPER CPA GROUP LLP CPA
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 13 / 2022
Transaction ID : AA91A5E6406FB4D469F5
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
RODELY, ROGER, A., MR.,
 Mailing Address 701 N ILLINOIS AVE
 City WEST FRANKFORT State IL Zip Code 62896-1837
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 NONE RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2022
Transaction ID : AFD1B650CA9BD46FE9BC
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
SANDRAVELIS, ANGELOS, , MR.,
 Mailing Address 4500 S LAKE RD
 City PINCKNEYVILLE State IL Zip Code 62274-3040
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2022
Transaction ID : ACBA64AFF37F74B2FA49
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 570.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 26 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
SHEEHY, CORY, , MR.,
Mailing Address 503 N 6TH ST

City MARSHALL	State IL	Zip Code 62441-1219
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2022

Transaction ID : A1B73B015EEC54921BC3

Amount of Each Receipt this Period
 300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
STICHT, JOHN, , ,
Mailing Address 525 ALBERS LANE

City BETHALTO	State IL	Zip Code 62010
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : AFE7E98D3734F4B9EA79

Amount of Each Receipt this Period
 100.00

Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

C. Full Name (Last, First, Middle Initial)
WINRED
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 24636.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : A10280502D75A466DB41

Amount of Each Receipt this Period
 100.00

Memo Item
 INTERMEDIARY
 TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶	400.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 27 OF 93	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
STINE, ARTHUR, M., MR.,

Mailing Address PO BOX 367

City OKAWVILLE	State IL	Zip Code 62271-0367
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 07 / 2022

Transaction ID : A8882F4AB38254F1DAEF

Amount of Each Receipt this Period
 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
STINE, ARTHUR, M., MR.,

Mailing Address PO BOX 367

City OKAWVILLE	State IL	Zip Code 62271-0367
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 18 / 2022

Transaction ID : A0203FEBA4D09491D83F

Amount of Each Receipt this Period
 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STINE, ARTHUR, M., MR.,

Mailing Address PO BOX 367

City OKAWVILLE	State IL	Zip Code 62271-0367
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 03 / 2022

Transaction ID : AFB626E552D4546ADBCD

Amount of Each Receipt this Period
 100.00

Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 28 OF 93

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
STOWERS, JAMES, B., MR.,
 Mailing Address 3612 VICTORIA AVE
 City MOUNT VERNON State IL Zip Code 62864-2208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BENNETT METAL PRODUCTS INC Occupation ATTORNEY
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2022
Transaction ID : A1E648888CD124BF194C
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
STUHRENBERG, CHARLES, , ,
 Mailing Address 1430 N 7TH STREET
 City MURPHYSBORO State IL Zip Code 62966-3938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BIG MUDDY BREWEING Occupation BREWER
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2022
Transaction ID : A118B1CBB9C224B469D1
 Amount of Each Receipt this Period
 250.00
 Memo Item
 IN-KIND:EVENT CATERING

C. Full Name (Last, First, Middle Initial)
STUMPF, GLENN, F, ,
 Mailing Address 9474 D ROAD
 City COLUMBIA State IL Zip Code 62236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2022
Transaction ID : AFD1E099C3BCE47EAB1E
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 850.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 OF 93
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
TARBLE, SARA, , MRS.,

Mailing Address 409 N 7TH ST

City MARSHALL	State IL	Zip Code 62441-1231
------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : A17CAFF3150664E1A9CB

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TEBBE, LISA, , MRS.,

Mailing Address 15648 HARRISON RD

City NASHVILLE	State IL	Zip Code 62263-4714
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 23 / 2022

Transaction ID : A5AFFD454DC9C44A19AE

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TREGONING, MARGARET, S., MRS.,

Mailing Address 2805 W MAIN ST

City MARION	State IL	Zip Code 62959-4940
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 03 / 2022

Transaction ID : A9118445EEDB9495C950

Amount of Each Receipt this Period
100.00

Memo Item

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 30 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
VERROCHI, ROCK, , ,

Mailing Address 428 WEATHERSTONE DR.

City BELLEVILLE State IL Zip Code 62221

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

Name of Employer USAF Occupation COMPUTER ENGINEER

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2022

Transaction ID : **AF7A83636B6244B00B29**

Amount of Each Receipt this Period
 100.00

Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 24636.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2022

Transaction ID : **A5293FF058324419697E**

Amount of Each Receipt this Period
 100.00

Memo Item
 INTERMEDIARY
 TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
VOGES, JOAN, E., MRS.,

Mailing Address 11113 OBST RD

City RED BUD State IL Zip Code 62278-4225

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2022

Transaction ID : **AD12CE7EDFC3B44C7917**

Amount of Each Receipt this Period
 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 31 OF 93	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
WAGNER, MARSHA, L., MRS.,

Mailing Address 7 IRMA LN

City FAIRVIEW HEIGHTS	State IL	Zip Code 62208-1904
--------------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2022

Transaction ID : A5EB8CA7942094656898

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WEBSTER, BEN, , ,

Mailing Address 8751 WEBSTER LN

City KINMUNDY	State IL	Zip Code 62854-3319
------------------	-------------	------------------------

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

Name of Employer DEEO ROCK ENERGY	Occupation PRESIDENT
--------------------------------------	-------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2022

Transaction ID : A80BFE27E344F4DD5B82

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WEINHEIMER, MARK, , MR.,

Mailing Address 8408 ROCK RIDGE CT

City EDWARDSVILLE	State IL	Zip Code 62025-6776
----------------------	-------------	------------------------

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

Name of Employer WEINHEIMER OPEL LAW FIRM	Occupation ATTORNEY
--	------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2022

Transaction ID : AA588CA63A3DF4E35A58

Amount of Each Receipt this Period
500.00

Memo Item

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

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

2600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 32 OF 93	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
WELGE, ROBERT, E., MR.,

Mailing Address 28 KNOLLWOOD DR

City CHESTER	State IL	Zip Code 62233-1415
-----------------	-------------	------------------------

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

Name of Employer GILSTEN-MARYLEE GROUP	Occupation HR DIRECTOR
---	---------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2020 2021 2022 2023 2024

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2022

Transaction ID : A3135AE0DB1E94D12B2B

Amount of Each Receipt this Period
 0.00 250.00 500.00 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WEST, JOHN, W., MR.,

Mailing Address 1838 RIVIERA LN

City O FALLON	State IL	Zip Code 62269-6697
------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2020 2021 2022 2023 2024

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2022

Transaction ID : AF92D1074489B4A338C2

Amount of Each Receipt this Period
 0.00 250.00 500.00 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WIELAND, JANE, F, MRS.,

Mailing Address 1800 RIVIERA LN

City O FALLON	State IL	Zip Code 62269
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2020 2021 2022 2023 2024

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 30 / 2022

Transaction ID : A4B41BC3AB7544E23960

Amount of Each Receipt this Period
 0.00 50.00 100.00 250.00 500.00 1000.00

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

0.00 550.00 1000.00

0.00 550.00 1000.00

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

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

FOR LINE NUMBER: PAGE 33 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
24636.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2022

Transaction ID : **A41CEFD9BF4354B5F81B**

Amount of Each Receipt this Period
50.00

Memo Item
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
WIELAND, JANE, F, MRS.,

Mailing Address 1800 RIVIERA LN

City O FALLON State IL Zip Code 62269

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2022

Transaction ID : **AD5CFADDC43E843AA8DE**

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
YARGUS, LARRY, , ,

Mailing Address 18991 N HAMMER RD

City MARSHALL State IL Zip Code 62441-3618

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2022

Transaction ID : **A679B310D754D460096F**

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶ 31637.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 93	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
ABRAHAM LINCOLN PAC

Mailing Address 824 S MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605-1332

FEC ID number of contributing federal political committee. **C** C00631051

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : **A14CD451863104CA6AE9**

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALLIED PILOTS ASSOCIATION PAC

Mailing Address 14600 TRINITY BLVD
STE 500

City FORT WORTH State TX Zip Code 76155-2559

FEC ID number of contributing federal political committee. **C** C00267849

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : **AA1186F3EC4414A59928**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC

Mailing Address 251 H ST NW

City WASHINGTON State DC Zip Code 20001-2604

FEC ID number of contributing federal political committee. **C** C00797670

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2022

Transaction ID : **A8BEE035FECF04956878**

Amount of Each Receipt this Period
2900.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	8900.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 35 OF 93	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE ST
STE 300

City ALEXANDRIA	State VA	Zip Code 22314-2874
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00024968

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : A0E8C21846AD147E588D

Amount of Each Receipt this Period
4000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN SUNTANNING ASSOCIATION PAC

Mailing Address 3101 PAGE AVE

City JACKSON	State MI	Zip Code 49203-2254
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00563015

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : A1375E7E6A2804DDA99C

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ASSOCIATED EQUIPMENT DISTRIBUTORS PAC

Mailing Address 121 N HENRY ST

City ALEXANDRIA	State VA	Zip Code 22314-2903
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010124

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 25 / 2022

Transaction ID : AA4444F3D10B84A7D975

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

8000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 36 OF 93	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CGCN PAC

Mailing Address 1307 NEW YORK AVE NW
STE 602

City WASHINGTON State DC Zip Code 20005-4704

FEC ID number of contributing federal political committee. **C** C00690735

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 13 / 2022

Transaction ID : **AF5E7FFC79E0C4840B86**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COMMUNITY BANKERS ASSOCIATION OF ILLINOIS PAC

Mailing Address 901 COMMUNITY DR

City SPRINGFIELD State IL Zip Code 62703-5170

FEC ID number of contributing federal political committee. **C** C00291914

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : **A92C17E09C21142C3B9F**

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DELTA AIR LINES PAC

Mailing Address 1212 NEW YORK AVE NW
STE 200

City WASHINGTON State DC Zip Code 20005-6609

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : **A5FDE1E2CFEE4BAA9A7**

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

6500.00

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

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

FOR LINE NUMBER: PAGE 37 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
EXXONMOBIL PAC

Mailing Address 5959 LAS COLINAS BLVD.

City IRVING State TX Zip Code 75039-4202

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2022

Transaction ID : AF5D37AAF7F154578B41

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HOUSE CONSERVATIVES FUND

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00326439

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2022

Transaction ID : A62388C363CEF499CBF7

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL PORK PRODUCERS COUNCIL PORK PAC

Mailing Address PO BOX 10383

City DES MOINES State IA Zip Code 50306-0383

FEC ID number of contributing federal political committee. **C** C00201871

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2022

Transaction ID : A36B715F5803344C5890

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 38 OF 93
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
NETJETS ASSOCIATION OF SHARED AIRCRAFT PILOTS PAC; NJASAP PAC

Mailing Address 2740 AIRPORT DR
STE 330

City COLUMBUS State OH Zip Code 43219-2286

FEC ID number of contributing federal political committee. **C** C00488262

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : **AAE050AF5650A46AC904**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PHILIPS NORTH AMERICA LLC PAC

Mailing Address 1050 K ST NW
STE 900

City WASHINGTON State DC Zip Code 20001-4460

FEC ID number of contributing federal political committee. **C** C00239780

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : **A9613247CB40D4D6790C**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
REALTORS PAC

Mailing Address 430 N MICHIGAN AVE

City CHICAGO State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 15 / 2022

Transaction ID : **AFF7D2C7650DF4F5094C**

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 93	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
REPUBLICAN GOVERNANCE GROUP/TUESDAY GROUP PAC

Mailing Address 610 S BOULEVARD

City TAMPA	State FL	Zip Code 33606-2647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00433060

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : A2CBB340EE56947C6916

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address 325 7TH ST NW
STE 610

City WASHINGTON	State DC	Zip Code 20004-2822
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00165159

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : A7614A146E47C425B871

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
UBS AMERICAS INC. PAC (UBS PAC)

Mailing Address 600 WASHINGTON BLVD
C/O PER DYRVIK

City STAMFORD	State CT	Zip Code 06901-3726
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00012245

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : AB15605A644C34E43916

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7000.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
UPS PAC

Mailing Address 55 GLENLAKE PKWY

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2022

Transaction ID : AB08EB957C6B6499B86C

Amount of Each Receipt this Period
 2500.00

Memo Item

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	40900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
GT FARM TEAM 2022

Mailing Address PO BOX 30844

City: BETHESDA State: MD Zip Code: 20824

FEC ID number of contributing federal political committee: **C** C00805333

Name of Employer: Occupation:

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12975.66

Date of Receipt: 04 / 01 / 2022

Transaction ID : **AD911C9C543FE4821BEF**

Amount of Each Receipt this Period: 12975.66

Memo Item
TRANSFER OF NET JFC FUNDS

B. Full Name (Last, First, Middle Initial)
GREATER TOMORROW PAC

Mailing Address 600 PENNSYLVANIA AVE SE
STE 330

City: WASHINGTON State: DC Zip Code: 20003

FEC ID number of contributing federal political committee: **C** C00526715

Name of Employer: Occupation:

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt: 03 / 01 / 2022

Transaction ID : **A4A083D43FD29498E8B3**

Amount of Each Receipt this Period: 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MINN-DAK FARMERS COOPERATIVE SUGAR PAC

Mailing Address 7525 RED RIVER RD

City: WAHPETON State: ND Zip Code: 58075

FEC ID number of contributing federal political committee: **C** C00164939

Name of Employer: Occupation:

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt: 03 / 01 / 2022

Transaction ID : **A651504C71EDD4DADA3D**

Amount of Each Receipt this Period: 1250.00

Memo Item

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

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

12975.66

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRIENDS OF GLENN THOMPSON

Mailing Address 400 NORTH MICHAEL ST

City ST MARYS State PA Zip Code 15857

FEC ID number of contributing federal political committee. **C** C00444620

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2022

Transaction ID : **A6504C6013BA343D3BFD**

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BLEIBERG, PAUL, E, ,

Mailing Address 2401 CALVERT ST NW
APT 321

City WASHINGTON State DC Zip Code 20008

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2022

Transaction ID : **ABE5286F4818C49B6B57**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PLAINS COTTON GROWERS PAC

Mailing Address 4517 W LOOP 289

City LUBBOCK State TX Zip Code 79414

FEC ID number of contributing federal political committee. **C** C00599084

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2022

Transaction ID : **A2C67F2B5CB0B4C929C0**

Amount of Each Receipt this Period
1250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 93
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
RAIN AND HAIL INSURANCE SOCIETY PAC

Mailing Address 9200 NORTH PARK DR

City JOHNSTON	State IA	Zip Code 50131
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00279505

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2022

Transaction ID : A6D0ACB12821143189C0

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
UNITED STATES BEET SUGAR ASSOC. PAC

Mailing Address 1156 15TH ST NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00063586

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2022

Transaction ID : AA7D3D0D3E6834361A0D

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE NATIONAL COUNCIL OF FARMER COOPERATIVES PAC

Mailing Address 50 F ST NW
STE 900

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002238

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2022

Transaction ID : ADC482EC9427F4305950

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 93
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
AUSTIN SCOTT FOR CONGRESS INC

Mailing Address PO BOX 2530

City TIFTON	State GA	Zip Code 31793
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00482737

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2022

Transaction ID : **AEC00A02126C64E829F7**

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FLORIDA SUGAR CANE LEAGUE PAC

Mailing Address 1301 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00012328

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2022

Transaction ID : **A2C30B60947F34249813**

Amount of Each Receipt this Period
750.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GT FARM TEAM 2022

Mailing Address PO BOX 30844

City BETHESDA	State MD	Zip Code 20824
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00805333

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
14413.15

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 29 / 2022

Transaction ID : **AB8779D6F2D0F4C9C927**

Amount of Each Receipt this Period
1437.49

Memo Item
TRANSFER OF NET JFC FUNDS

SUBTOTAL of Receipts This Page (optional).....▶	1437.49
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 OF 93
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
NORTH AMERICAN MEAT INSTITUTE PAC

Mailing Address 1150 CONNECTICUT AVE NW
STE 1200

City WASHINGTON State DC Zip Code 20036-4126

FEC ID number of contributing federal political committee. **C** C00024281

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2022

Transaction ID : ADEB4B59E92E14FFCB04

Amount of Each Receipt this Period
1500.00

Memo Item

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	14413.15

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 46 OF 93	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
POLAR INVESTMENT COUNSEL, INC.

Mailing Address 19547 210TH AVE NE

City THIEF RIVER FALLS	State MN	Zip Code 56701-8354
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : A95B8E4B5C1424D719AE

Amount of Each Receipt this Period

Memo Item
BANK INTEREST

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

Mailing Address

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

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="204.75"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="204.75"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ABH CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2022	
Mailing Address 3410 ALABAMA AVE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22305-1736	Amount of Each Disbursement this Period 10872.69	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B75B675D477344DD9BAA	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ABH CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2022	
Mailing Address 3410 ALABAMA AVE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22305-1736	Amount of Each Disbursement this Period 9000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B144BA5B5D8E641F9997	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ACQUIRE DIGITAL, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2022	
Mailing Address 2000 GLEN ECHO RD STE 200			FEC Identification Number C	
City NASHVILLE	State TN	Zip Code 37215-2898	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement DIGITAL MARKETING		Category/ Type 001	Transaction ID : B3CA190E776BD4CEA8EB	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	22372.69
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ACQUIRE DIGITAL, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022		
Mailing Address 2000 GLEN ECHO RD STE 200					
City NASHVILLE	State TN	Zip Code 37215-2898	FEC Identification Number C		
Purpose of Disbursement DIGITAL MARKETING		Category/ Type 001	Amount of Each Disbursement this Period 0.30		
Candidate Name		Transaction ID : B5FE47EBB2A62497FBAD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. ACQUIRE DIGITAL, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2022		
Mailing Address 2000 GLEN ECHO RD STE 200					
City NASHVILLE	State TN	Zip Code 37215-2898	FEC Identification Number C		
Purpose of Disbursement DIGITAL MARKETING		Category/ Type 001	Amount of Each Disbursement this Period 7.50		
Candidate Name		Transaction ID : B23E5723C577545CA9B0			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. ACQUIRE DIGITAL, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022		
Mailing Address 2000 GLEN ECHO RD STE 200					
City NASHVILLE	State TN	Zip Code 37215-2898	FEC Identification Number C		
Purpose of Disbursement DIGITAL MARKETING		Category/ Type 001	Amount of Each Disbursement this Period 7.00		
Candidate Name		Transaction ID : B366872D8AB94454FA69			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	14.80
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ACQUIRE DIGITAL, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2022		
Mailing Address 2000 GLEN ECHO RD STE 200			FEC Identification Number C		
City NASHVILLE	State TN	Zip Code 37215-2898	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement DIGITAL MARKETING		Category/ Type 001	Transaction ID : B9A4B5E1183A44774880		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ACQUIRE DIGITAL, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022		
Mailing Address 2000 GLEN ECHO RD STE 200			FEC Identification Number C		
City NASHVILLE	State TN	Zip Code 37215-2898	Amount of Each Disbursement this Period 30.00		
Purpose of Disbursement DIGITAL MARKETING		Category/ Type 001	Transaction ID : B25B41F0AEBE94CE5BCF		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ACQUIRE DIGITAL, LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2022		
Mailing Address 2000 GLEN ECHO RD STE 200			FEC Identification Number C		
City NASHVILLE	State TN	Zip Code 37215-2898	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement DIGITAL MARKETING		Category/ Type 001	Transaction ID : B8D39F130FF40436EAC9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5030.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ACQUIRE DIGITAL, LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2022	
Mailing Address 2000 GLEN ECHO RD STE 200			FEC Identification Number C	
City NASHVILLE	State TN	Zip Code 37215-2898	Amount of Each Disbursement this Period 23.50	
Purpose of Disbursement DIGITAL MARKETING		Category/ Type 001	Transaction ID : B51FD4687D1AD4614ACF	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ADVANTAGE DIRECT			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2022	
Mailing Address 2300 CLARENDON BOULEVARD SUITE 303			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22201-3367	Amount of Each Disbursement this Period 1200.00	
Purpose of Disbursement TELECONFERENCING SERVICES		Category/ Type 001	Transaction ID : BB8166196D0D34E8ABED	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMEREN ILLINOIS			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2022	
Mailing Address PO BOX 66884			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63166-6884	Amount of Each Disbursement this Period 93.02	
Purpose of Disbursement UTILITIES		Category/ Type 001	Transaction ID : B1B0CB8071FB84291999	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1316.52
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. AMEREN ILLINOIS			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2022	
Mailing Address PO BOX 66884			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63166-6884	Amount of Each Disbursement this Period 79.82	
Purpose of Disbursement UTILITIES		Category/ Type 001	Transaction ID : B31AAE448567D490B8A6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2022	
Mailing Address 1340 POYDRAS ST, STE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112-5204	Amount of Each Disbursement this Period 2.25	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B99A922FFD46C444FBC7	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2022	
Mailing Address 1340 POYDRAS ST, STE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112-5204	Amount of Each Disbursement this Period 16.50	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B20637E95CDA54C158A8	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	98.57
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2022
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1.67
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BC35655E197174A7FB17 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2022
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 4.54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B5C012B7A021F454AA0C <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2022
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 24.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B1C8A6A06981946309B9 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	30.21
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2022
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 10.05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BD397BA0050E74FCAA64	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2022
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 29.85
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B2121CD854B824655A9E	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2022
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 39.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B56182DFE969841EA955	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	79.50
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2022
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 78.30
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2022
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 0.34
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BELLEVILLE NEWS DEMOCRAT		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2022
Mailing Address 120 S ILLINOIS STREET # 159		FEC Identification Number C
City BELLEVILLE	State IL	Zip Code 62220-2130
Purpose of Disbursement NEWSPAPER	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 17.99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	96.63
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. CASEY'S GENERAL STORES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3001

City ANKENY State IA Zip Code 50021-8045

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement: 04 / 12 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 40.58

Transaction ID : BAB06ECDAF4274512AB2

Memo Item

B. CASEY'S GENERAL STORES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3001

City ANKENY State IA Zip Code 50021-8045

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement: 05 / 16 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 52.97

Transaction ID : B6A3D69D3723145F68C2

Memo Item

C. CASEY'S GENERAL STORES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3001

City ANKENY State IA Zip Code 50021-8045

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement: 05 / 27 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 47.78

Transaction ID : B0B22C52F383847DEBD7

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 141.33

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. CHARTER COMMUNICATIONS		Date of Disbursement
Mailing Address 1638 CARLYLE AVE		M M / D D / Y Y Y Y 05 / 12 / 2022
City BELLEVILLE	State IL	Zip Code 62221-4558
Purpose of Disbursement INTERNET SERVICE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B480FDB6DCFF34581BED	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. CHARTER COMMUNICATIONS		Date of Disbursement
Mailing Address 1638 CARLYLE AVE		M M / D D / Y Y Y Y 06 / 08 / 2022
City BELLEVILLE	State IL	Zip Code 62221-4558
Purpose of Disbursement INTERNET SERVICE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B8CDB7FB0FA6448BBBAB	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. CIRCLE K		Date of Disbursement
Mailing Address 150 N MILL STREET		M M / D D / Y Y Y Y 04 / 25 / 2022
City NASHVILLE	State IL	Zip Code 62263-1739
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B77CF1B85BD6E438DAC1	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	401.39
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

A. CITICARDS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 6004

City SIOUX FALLS State SD Zip Code 57117-6004

Purpose of Disbursement SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 5552.18

Transaction ID : B5139ACDEDD2241B0B5D

Memo Item

B. UBER TECHNOLOGIES

Full Name (Last, First, Middle Initial)
Mailing Address 1455 MARKET STREET #400

City SAN FRANCISCO State CA Zip Code 94103-1355

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 500.69

Transaction ID : B51308E3D88FC4577B50

Memo Item

C. CITY OF ST. LOUIS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 78459

City SAINT LOUIS State MO Zip Code 63178-8459

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: - 138.00

Transaction ID : BECDE08AFD7DD40868A1

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 5552.18

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. INN AT 835			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022	
Mailing Address 835 S 2ND STREET			FEC Identification Number C	
City SPRINGFIELD	State IL	Zip Code 62704-2601	Amount of Each Disbursement this Period 387.60	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : B4ACF16FEF3C44D5DB5E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. RENAISSANCE HOTELS			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022	
Mailing Address 10400 FERNWOOD ROAD			FEC Identification Number C	
City BETHESDA	State MD	Zip Code 20817-1102	Amount of Each Disbursement this Period 236.39	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : B2D668452AE6E4E74B28	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. HOUSE WELLNESS CENTER			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022	
Mailing Address H2-140 FORD HOUSE OFFICE BLDG			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20515-0001	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement MEMBERSHIP DUES		Category/ Type 001	Transaction ID : BF9603776FC034E1D83D	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. CAPITAL GRILLE		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022
Mailing Address 601 PENNSYLVANIA AVENUE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20004-2601
Purpose of Disbursement MEETING EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 274.77
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B3EFDB869488A4D9E927
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022
Mailing Address 4333 AMON CARTER BOULEVARD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2605
Purpose of Disbursement AIRFARE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 907.91
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD3F9AF810F05401CB5A
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CIRCLE K		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022
Mailing Address 150 N MILL STREET		FEC Identification Number C
City NASHVILLE	State IL	Zip Code 62263-1739
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 82.37
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B07E7A36CED7E49D8ABF
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 972.28	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B3EF30E994CE0452E942	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. COURTYARD BY MARRIOTT			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022	
Mailing Address 165 E ONTARIO STREET			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60611-2822	Amount of Each Disbursement this Period 1121.64	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : B70DB9DF4DA34455C9F6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CHARLIE PALMER STEAK			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022	
Mailing Address 101 CONSTITUTION AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 229.20	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B65C99F70E3054128879	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. CITICARDS		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022
Mailing Address PO BOX 6004		FEC Identification Number C
City SIOUX FALLS	State SD	Zip Code 57117-6004
Purpose of Disbursement SEE MEMO	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 7287.16
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022
Mailing Address 233 S WACKER DRIVE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606-7147
Purpose of Disbursement AIRFARE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 367.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. COURTYARD BY MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022
Mailing Address 165 E ONTARIO STREET		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60611-2822
Purpose of Disbursement LODGING	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1432.42
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	7287.16
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. NEW CONGRESSIONAL LIQUOR			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address 401 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1827	Amount of Each Disbursement this Period 199.48	
Purpose of Disbursement EVENT BEVERAGES		Category/ Type 001	Transaction ID : BC74AE7F1A75F430F8E4	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address LAMBERT INTERNATIONAL AIRPORT			FEC Identification Number C	
City ST. LOUIS	State MO	Zip Code 63100	Amount of Each Disbursement this Period 534.36	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : BEA9A36F1A6F1463D920	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address 4333 AMON CARTER BOULEVARD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 820.13	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : B32BA2FFABF9B427183B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. BELLA MILANO			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address 4525 WABASH AVENUE			FEC Identification Number C	
City SPRINGFIELD	State IL	Zip Code 62711-7037	Amount of Each Disbursement this Period 103.81	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B3D67C7AF350C4762BB9	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CITY OF ST. LOUIS			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address PO BOX 78459			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63178-8459	Amount of Each Disbursement this Period 5.00	
Purpose of Disbursement PARKING		Category/ Type 001	Transaction ID : B566BDAC2381E4744ADF	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. TED'S BULLETIN			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address 1818 14TH ST NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20009-4470	Amount of Each Disbursement this Period 148.95	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B91CEF131802E4F57BD8	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1801
Purpose of Disbursement MEETING EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 468.89
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. KROGER		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022
Mailing Address RT. 13 WEST		FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 239.62
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. VINO VOLO		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022
Mailing Address LABERT AIRPORT		FEC Identification Number C
City SAINT LOUIS	State MO	Zip Code 63145
Purpose of Disbursement MEETING EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 57.15
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. CLEARME.COM			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address 65 E 55TH ST, FL 17			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10022-3414	Amount of Each Disbursement this Period 239.00	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BF780F82A43424A8DAE8	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. RENAISSANCE HOTELS			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address 10400 FERNWOOD ROAD			FEC Identification Number C	
City BETHESDA	State MD	Zip Code 20817-1102	Amount of Each Disbursement this Period 160.03	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : BEE97A1B7E72C4CD0A63	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address 1455 MARKET STREET #400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103-1355	Amount of Each Disbursement this Period 618.39	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BECBAD1E3337D4CF09C6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. HILTON HOTELS			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022	
Mailing Address 1919 CONNECTICUT AVE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20009-5701	Amount of Each Disbursement this Period 858.57	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : B06818AE88A7643319ED	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2022	
Mailing Address 10 10TH ST NW #600			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30309	Amount of Each Disbursement this Period 48.00	
Purpose of Disbursement WEB SERVICES		Category/ Type 001	Transaction ID : B92BAB7E0137C47E98AE	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2022	
Mailing Address 10 10TH ST NW #600			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30309	Amount of Each Disbursement this Period 48.00	
Purpose of Disbursement WEB SERVICES		Category/ Type 001	Transaction ID : B008698C77A104782A98	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	96.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022		
Mailing Address 10 10TH ST NW #600			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30309	Amount of Each Disbursement this Period 48.00		
Purpose of Disbursement WEB SERVICES		Category/ Type 001	Transaction ID : BAD17B06C801F424A854		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. HUCKS FOOD STORE			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022		
Mailing Address 1937 WALNUT STREET			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-1909	Amount of Each Disbursement this Period 55.88		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : BE814A8EBE43442E8B9C		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. HUCKS FOOD STORE			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2022		
Mailing Address 1937 WALNUT STREET			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-1909	Amount of Each Disbursement this Period 48.88		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : B541A58D3524F4895ACE		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	152.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. HUCKS FOOD STORE			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2022		
Mailing Address 1937 WALNUT STREET			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-1909	Amount of Each Disbursement this Period 46.75		
Purpose of Disbursement TRAVEL EXPENSE		Category/Type	Transaction ID : B9469735967E940A2B7D		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. HUCKS FOOD STORE			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2022		
Mailing Address 1937 WALNUT STREET			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-1909	Amount of Each Disbursement this Period 64.70		
Purpose of Disbursement TRAVEL EXPENSE		Category/Type	Transaction ID : BC41B4AAE316646B7A51		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ILLINOIS DEPARTMENT OF EMPLOYMENT SECURITY			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2022		
Mailing Address 8195 EXPRESS DRIVE			FEC Identification Number C		
City MARION	State IL	Zip Code 62959-5816	Amount of Each Disbursement this Period 159.21		
Purpose of Disbursement UNEMPLOYMENT INSURANCE		Category/Type 001	Transaction ID : B9F41B556DDE54039862		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	270.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ILLINOIS DEPARTMENT OF REVENUE			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2022
Mailing Address PO BOX 19052			FEC Identification Number C
City SPRINGFIELD	State IL	Zip Code 62794-9052	Amount of Each Disbursement this Period 420.76
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : BD1A44CC080B04ED2B6D
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ILLINOIS DEPARTMENT OF REVENUE			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2022
Mailing Address PO BOX 19052			FEC Identification Number C
City SPRINGFIELD	State IL	Zip Code 62794-9052	Amount of Each Disbursement this Period 420.76
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : B95A6DCE5122442778D2
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. INTERNAL REVENUE SERVICE			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2022
Mailing Address PO BOX 70503			FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28272	Amount of Each Disbursement this Period 2280.50
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : BA5470CE1CB694A87B37
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	3122.02
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. INTERNAL REVENUE SERVICE			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2022		
Mailing Address PO BOX 70503			FEC Identification Number C		
City CHARLOTTE	State NC	Zip Code 28272	Amount of Each Disbursement this Period 2280.50		
Purpose of Disbursement PAYROLL TAXES		Category/Type 001	Transaction ID : B5EB5498CDF4149E7BAD		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. INTUIT			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022		
Mailing Address 2632 MARINE WAY			FEC Identification Number C		
City MOUNTAIN VIEW	State CA	Zip Code 94043-1126	Amount of Each Disbursement this Period 290.80		
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001	Transaction ID : B24826700743248A69C3		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. KAP PRINT, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2022		
Mailing Address 3565 S LAS VEGAS STE 306			FEC Identification Number C		
City LAS VEGAS	State NV	Zip Code 89109-8919	Amount of Each Disbursement this Period 715.21		
Purpose of Disbursement PRINTING		Category/Type 001	Transaction ID : BD2D17E5653194845A85		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3286.51
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. KAP PRINT, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2022		
Mailing Address 3565 S LAS VEGAS STE 306			FEC Identification Number C		
City LAS VEGAS	State NV	Zip Code 89109-8919	Amount of Each Disbursement this Period 5272.00		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : BB6C33874C28C4FBEA67		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. KAP PRINT, LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2022		
Mailing Address 3565 S LAS VEGAS STE 306			FEC Identification Number C		
City LAS VEGAS	State NV	Zip Code 89109-8919	Amount of Each Disbursement this Period 5622.75		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : BF6AA4B260E074336874		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. KAP STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2022		
Mailing Address 229 EVANS LANE			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22305-3002	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : BAEE96765568749E8BEF		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	12894.75
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. KAP STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022	
Mailing Address 229 EVANS LANE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22305-3002	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : B8EC6FA7CFF084EBEA2D	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. KAP STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2022	
Mailing Address 229 EVANS LANE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22305-3002	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : B5D86E641380342E2A16	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. LAW OFFICE OF JOHN FOGARTY, JR.			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2022	
Mailing Address 4043 N RAVENSWOOD AVE STE 226			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60613-5682	Amount of Each Disbursement this Period 910.00	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : BEB817BB217D8484EA38	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4910.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. MARION COUNTY REPUBLICAN CENTRAL COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2022		
Mailing Address PO BOX 1628			FEC Identification Number C		
City CENTRALIA	State IL	Zip Code 62801-9161	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : B0742D8F35B9645B2ACC		
Candidate Name MARION COUNTY REPUBLICAN CENTRAL COMMITTEE		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. MEDIACOM			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2022		
Mailing Address 300 E MAIN STREET SUITE 21			FEC Identification Number C		
City CARBONDALE	State IL	Zip Code 62901-3029	Amount of Each Disbursement this Period 51.01		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : B84F5DF167FF2498897		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. MEDIACOM			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2022		
Mailing Address 300 E MAIN STREET SUITE 21			FEC Identification Number C		
City CARBONDALE	State IL	Zip Code 62901-3029	Amount of Each Disbursement this Period 50.86		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : BC2622DC6FFA3468A8C9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....▶	351.87
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. MGS CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2022	
Mailing Address 714 ELMTREE LN			FEC Identification Number C	
City KIRKWOOD	State MO	Zip Code 63122-3602	Amount of Each Disbursement this Period 238.36	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BA60F3D6B218244F7A5E	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. MGS CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2022	
Mailing Address 714 ELMTREE LN			FEC Identification Number C	
City KIRKWOOD	State MO	Zip Code 63122-3602	Amount of Each Disbursement this Period 8417.50	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B1381B0A1B9904CF3929	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. MORGAN AND GUTHMAN LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2022	
Mailing Address 217 ROBERT MORGAN ROAD			FEC Identification Number C	
City MURPHYSBORO	State IL	Zip Code 62966-6117	Amount of Each Disbursement this Period 110.00	
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type 001	Transaction ID : B259F8484DECD4E75BF4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	8765.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. MOTOMART			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2022	
Mailing Address 1 HOWELLMAN DRIVE			FEC Identification Number C	
City DU QUOIN	State IL	Zip Code 62832-2463	Amount of Each Disbursement this Period 55.48	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : BA4CF3241D0D049F2ACD	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. MOTOMART			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2022	
Mailing Address 1 HOWELLMAN DRIVE			FEC Identification Number C	
City DU QUOIN	State IL	Zip Code 62832-2463	Amount of Each Disbursement this Period 41.50	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : B85A3D82E510942DB883	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. NELSON, MYLES, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2022	
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C	
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 2020.49	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BBFFE048A461C4206955	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2117.47
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. NELSON, MYLES, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2022		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 2020.50		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B475A8F6FE6834BAE994		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. NELSON, MYLES, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2022		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 2020.49		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B81E2F9971A944E04AF5		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. NELSON, MYLES, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2022		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 2020.50		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BA415FD553C274ADBBEF		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6061.49
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address PO BOX 9027		FEC Identification Number C
City DES MOINES	State IA	Zip Code 50368
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 533.09	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B500C92A6E9B64A0E9F0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. OVERSTREET, FISHER, P., ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2022
Mailing Address 6 WARWICK LN		FEC Identification Number C
City MOUNT VERNON	State IL	Zip Code 62864-2344
Purpose of Disbursement SALARY	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 1204.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA71357D7349048F5B02
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. OVERSTREET, FISHER, P., ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2022
Mailing Address 6 WARWICK LN		FEC Identification Number C
City MOUNT VERNON	State IL	Zip Code 62864-2344
Purpose of Disbursement SALARY	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 1204.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B5A7A2CFB10BC409488F
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2941.09
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. OVERSTREET, FISHER, P., ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022		
Mailing Address 6 WARWICK LN			FEC Identification Number C		
City MOUNT VERNON	State IL	Zip Code 62864-2344	Amount of Each Disbursement this Period 277.00		
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : BCC36819CE11843C4A25		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. CASEY'S GENERAL STORES			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022		
Mailing Address PO BOX 3001			FEC Identification Number C		
City ANKENY	State IA	Zip Code 50021-8045	Amount of Each Disbursement this Period 20.35		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B713B8D0E345C4F5B850		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. CIRCLE K			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022		
Mailing Address 150 N MILL STREET			FEC Identification Number C		
City NASHVILLE	State IL	Zip Code 62263-1739	Amount of Each Disbursement this Period 150.60		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B0D5024D6B16F4CA7B4D		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	277.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. HUCKS FOOD STORE			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022		
Mailing Address 1937 WALNUT STREET			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-1909	Amount of Each Disbursement this Period 30.46		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BE0B4E25FAF4F4A2DB4D		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. OVERSTREET, FISHER, P., ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2022		
Mailing Address 6 WARWICK LN			FEC Identification Number C		
City MOUNT VERNON	State IL	Zip Code 62864-2344	Amount of Each Disbursement this Period 1204.00		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B3C0ED3ADBD4C4CF08A0		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. OVERSTREET, FISHER, P., ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2022		
Mailing Address 6 WARWICK LN			FEC Identification Number C		
City MOUNT VERNON	State IL	Zip Code 62864-2344	Amount of Each Disbursement this Period 1204.00		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B501388DF17CD460485A		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2408.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. OVERSTREET, FISHER, P., ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2022		
Mailing Address 6 WARWICK LN			FEC Identification Number C		
City MOUNT VERNON	State IL	Zip Code 62864-2344	Amount of Each Disbursement this Period 266.93		
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : B33469C67CD18420EA45		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. HUCKS FOOD STORE			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2022		
Mailing Address 1937 WALNUT STREET			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-1909	Amount of Each Disbursement this Period 60.18		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B083D447C028D44BF8FC		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. PHILLIPS 66 COMPANY			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2022		
Mailing Address 201 NW 63RD STREET SUITE 300			FEC Identification Number C		
City OKLAHOMA CITY	State OK	Zip Code 73116-8210	Amount of Each Disbursement this Period 30.29		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BFE54CB280EA04BAF9E8		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	266.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. CIRCLE K		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2022
Mailing Address 150 N MILL STREET		FEC Identification Number C
City NASHVILLE	State IL	Zip Code 62263-1739
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 126.17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PATRIOT SIGNAGE INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2022
Mailing Address 10561 CHESTER RD		FEC Identification Number C
City CINCINNATI	State OH	Zip Code 45215-1203
Purpose of Disbursement SIGNS	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 9739.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. POLAR INVESTMENTS AND INSURANCE SERVICES INC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2022
Mailing Address 300 E MAIN STREET SUITE 1		FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901-3029
Purpose of Disbursement BOOKKEEPING SERVICE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 600.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10339.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. POLAR INVESTMENTS AND INSURANCE SERVICES INC		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022
Mailing Address 300 E MAIN STREET SUITE 1		FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901-3029
Purpose of Disbursement BOOKKEEPING SERVICE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 600.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B8151D9AFF1CB4F1885D <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. POLAR INVESTMENTS AND INSURANCE SERVICES INC		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2022
Mailing Address 300 E MAIN STREET SUITE 1		FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901-3029
Purpose of Disbursement BOOKKEEPING SERVICE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 600.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B9FBB507806624A9BAFD <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2022
Mailing Address 824 S. MILLEDGE AVE. SUITE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1531.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B99AF767594B54BB5878 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2731.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2022		
Mailing Address 824 S. MILLEDGE AVE. SUITE 101			FEC Identification Number C		
City ATHENS	State GA	Zip Code 30605-1332	Amount of Each Disbursement this Period 1525.00		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : B8F6EA039598D4BE88A0		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SHELL			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2022		
Mailing Address 1902 W MARKET STREET			FEC Identification Number C		
City BLOOMINGTON	State IL	Zip Code 61701-2603	Amount of Each Disbursement this Period 56.80		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : B25783A3B674F41B7A36		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. SILKWORM, INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2022		
Mailing Address 102 S SEZMORE DRIVE			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-7046	Amount of Each Disbursement this Period 451.89		
Purpose of Disbursement PROMOTIONAL ITEMS-BUMPER STICKERS		Category/ Type 001	Transaction ID : B4881ED49C3EE4DDE85D		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2033.69
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. SILKWORM, INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2022		
Mailing Address 102 S SEZMORE DRIVE			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-7046	Amount of Each Disbursement this Period 975.61		
Purpose of Disbursement PROMOTIONAL ITEMS-SHIRTS		Category/ Type 001	Transaction ID : BE60752D4A485489B956		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. STUHRENBERG, CHARLES, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2022		
Mailing Address 1430 N 7TH STREET			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-3938	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement IN-KIND:EVENT CATERING		Category/ Type	Transaction ID : B118B1CBB9C224B469D1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. U. S. POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2022		
Mailing Address 154 W PARK AVENUE			FEC Identification Number C		
City ELMHURST	State IL	Zip Code 60126-6300	Amount of Each Disbursement this Period 582.00		
Purpose of Disbursement POSTAGE		Category/ Type	Transaction ID : B722E6DD81BB549089ED		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1807.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2022
Mailing Address PO BOX 9688		FEC Identification Number C
City MISSION HILLS	State CA	Zip Code 91346-9688
Purpose of Disbursement TELEPHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 232.34	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BBD2914F74D68492595B	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022
Mailing Address PO BOX 9688		FEC Identification Number C
City MISSION HILLS	State CA	Zip Code 91346-9688
Purpose of Disbursement TELEPHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 319.54	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B415D373DB54F4541817	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. WINNING SYSTEMS		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2022
Mailing Address 105 S YORK STREET FLOOR 5		FEC Identification Number C
City ELMHURST	State IL	Zip Code 60126-3455
Purpose of Disbursement FUNDRAISING CONSULTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BE6ADB0E3810444E48D3	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1551.88
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. WINNING SYSTEMS			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2022	
Mailing Address 105 S YORK STREET FLOOR 5			FEC Identification Number C	
City ELMHURST	State IL	Zip Code 60126-3455	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B595A54EA084F4C779E5	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022	
Mailing Address PO BOX 9891			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 2.29	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B5579EBF9A8C1404FBC5	
Candidate Name WINRED		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WINRED			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2022	
Mailing Address PO BOX 9891			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 9.75	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BBA6E61403246492A9C4	
Candidate Name WINRED		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1012.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. WINRED		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2022
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	Amount of Each Disbursement this Period 4.11
Candidate Name WINRED	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : BA92F112F92F1425FAD1 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	Amount of Each Disbursement this Period 4.97
Candidate Name WINRED	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : B292D17A81B8945C9B8B <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2022
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	Amount of Each Disbursement this Period 23.62
Candidate Name WINRED	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : B76DA758284424DE2A14 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	32.70
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. WINRED			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2022	
Mailing Address PO BOX 9891			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 2.32	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B19D2CEA3E52844678A5	
Candidate Name WINRED		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2022	
Mailing Address PO BOX 9891			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 6.40	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BBEFBE37BF6FF47B1B1F	
Candidate Name WINRED		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WINRED			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2022	
Mailing Address PO BOX 9891			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 0.89	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BE37990DCA07E4BA3B98	
Candidate Name WINRED		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	9.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. WINRED			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2022		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 30.94		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B016192C56D5049999E4		
Candidate Name WINRED		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....▶	30.94
TOTAL This Period (last page this line number only).....▶	109892.36

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 93	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ASHLEY HINSON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address PO BOX 811		FEC Identification Number C C00706267
City MARION	State IA	Zip Code 52302-0811
Purpose of Disbursement CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 1000.00
Candidate Name ARENHOLZ, ASHLEY, HINSON, ,	Category/ Type	Transaction ID : BB242E16C3E6544A7AE2
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA District: 02		

Full Name (Last, First, Middle Initial) B. CARLOS GIMENEZ FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address 1421 SW 107TH AVE # 236		FEC Identification Number C C00735985
City MIAMI	State FL	Zip Code 33174-2526
Purpose of Disbursement CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 1000.00
Candidate Name GIMENEZ, CARLOS, , ,	Category/ Type	Transaction ID : B0424B3FD0D0645429A2
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL District: 28		

Full Name (Last, First, Middle Initial) C. DON BACON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address PO BOX 391368		FEC Identification Number C C00575167
City OMAHA	State NE	Zip Code 68139-1368
Purpose of Disbursement CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 1000.00
Candidate Name BACON, DONALD, J, ,	Category/ Type	Transaction ID : BCCADAA2DDDA47A180B
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE District: 02		

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 93
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. GARBARINO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address PO BOX 101		FEC Identification Number C C00729954
City BAYPORT	State NY	Zip Code 11705-0101
Purpose of Disbursement CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name GARBARINO, ANDREW, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY	District: 02	Transaction ID : BDC682567BA034B4D8B2 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. MAGGIE'S LIST		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2022
Mailing Address 6675 WEEPING WILLOW WAY		FEC Identification Number C C00469023
City TALLAHASSEE	State FL	Zip Code 32311-0311
Purpose of Disbursement CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name MAGGIE'S LIST	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	Transaction ID : B48F5D7D26A1447C8BD6 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. MICHELLE STEEL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address 9070 IRVINE CENTER DR STE 150		FEC Identification Number C C00704981
City IRVINE	State CA	Zip Code 92618-4691
Purpose of Disbursement CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name STEEL, MICHELLE, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA	District: 45	Transaction ID : B254DDE206B22400EB4E <input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 93	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. MIKE GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address 9070 IRVINE CENTER DR STE 150		FEC Identification Number C C00701102
City IRVINE	State CA	Zip Code 92618-4691
Purpose of Disbursement CONTRIBUTION	Category/Type 011	
Candidate Name GARCIA, MICHAEL, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 27	Transaction ID : BE830E2DD8BF744EBAB9 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MILLER-MEEKS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address PO BOX 33		FEC Identification Number C C00558825
City OTTUMWA	State IA	Zip Code 52501-0033
Purpose of Disbursement CONTRIBUTION	Category/Type 011	
Candidate Name MILLER-MEEKS, MARIANNETTE, JANE, ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 01	Transaction ID : B8F6070A91FB141E982C <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. SALAZAR FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address 3725 W FLAGLER ST # 281		FEC Identification Number C C00714261
City CORAL GABLES	State FL	Zip Code 33134-1601
Purpose of Disbursement CONTRIBUTION	Category/Type 011	
Candidate Name SALAZAR, MARIA, ELVIRA, ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 27	Transaction ID : BB3E29EA0A8934F15B3E <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 93	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MIKE BOST FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. STEVE CHABOT FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address 9856 ARCHER LN			FEC Identification Number C C00301838
City DUBLIN	State OH	Zip Code 43017-8914	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : B2AF872E3C2B64069891
Candidate Name CHABOT, STEVE, , ,		Disbursement For: 2022	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 01			

Full Name (Last, First, Middle Initial) B. YOUNG KIM FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2022
Mailing Address PO BOX 2186			FEC Identification Number C C00665638
City FULLERTON	State CA	Zip Code 92837-0186	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : B287C51D2592C402F9EB
Candidate Name KIM, YOUNG, , ,		Disbursement For: 2022	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 40			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			FEC Identification Number C
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name		Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	11000.00