

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**John Bolton PAC**

ADDRESS (number and street) **1730 M Street NW**  
**Suite 611**  
 Check if different than previously reported. (ACC) **Washington DC 20036**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00542431** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  05 /  01 /  2018 through  05 /  31 /  2018

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

Signature of Treasurer Hobbs, Cabell, , , [Electronically Filed] Date  06 /  20 /  2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**John Bolton PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		589973.62
(b) Cash on Hand at Beginning of Reporting Period.....	575854.71	
(c) Total Receipts (from Line 19) .....	5587.29	484653.96
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	581442.00	1074627.58
7. Total Disbursements (from Line 31).....	49470.81	542656.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	531971.19	531971.19
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

**John Bolton PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
05 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y  
05 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	615.00	101900.00
(ii) Unitemized .....	3263.35	361813.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3878.35	463713.42
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	3878.35	463713.42
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	368.67
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1708.94	15571.87
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	5587.29	484653.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5587.29	484653.96

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	49470.81	407656.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	49470.81	407656.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	135000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	49470.81	542656.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49470.81	542656.39

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3878.35	463713.42
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3878.35	463713.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	49470.81	407656.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	368.67
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	49470.81	407287.72

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

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

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

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

**A. LEBLANC, SALLY, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 513 HIGHLAND AVENUE

City NORTH DARTMOUTH	State MA	Zip Code 02747-1129
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) T LEBLANC & SONS, INC.	Occupation (for Individual) OFFICE MANAGER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2018  
**Transaction ID : SA11A.215699**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

**B. LEBLANC, SALLY, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 513 HIGHLAND AVENUE

City NORTH DARTMOUTH	State MA	Zip Code 02747-1129
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) T LEBLANC & SONS, INC.	Occupation (for Individual) OFFICE MANAGER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2018  
**Transaction ID : SA11A.215713**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C. LEBLANC, SALLY, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 513 HIGHLAND AVENUE

City NORTH DARTMOUTH	State MA	Zip Code 02747-1129
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) T LEBLANC & SONS, INC.	Occupation (for Individual) OFFICE MANAGER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2018  
**Transaction ID : SA11A.215716**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

**A. NICHOLAS, BRUCE, S., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 HOWARD RD.  
 City GREENWICH State CT Zip Code 06831-3104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2018  
**Transaction ID : SA11A.215659**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B. WISEMAN, DENISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9810 STATE HIGHWAY 220  
 City CASPER State WY Zip Code 82604-9184  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2018  
**Transaction ID : SA11A.215702**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	615.00

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

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NOVA LIST COMPANY**

Mailing Address 20130 LAKEVIEW CENTER PLAZA  
STE 300

City ASHBURN State VA Zip Code 20141

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8949.82

Date of Receipt  
05 / 08 / 2018  
Transaction ID : SA98552

Amount of Each Receipt this Period  
774.78

Memo Item  
LIST RENTAL INCOME

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. RIGHT COUNTRY LISTS**

Mailing Address 117 N. ST. ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6615.81

Date of Receipt  
05 / 21 / 2018  
Transaction ID : SA92544

Amount of Each Receipt this Period  
932.88

Memo Item  
LIST RENTAL INCOME

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1707.66
<b>TOTAL</b> This Period (last page this line number only).....	1707.66



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. FLAVIN, KATHY, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2018
Mailing Address 1730 M STREET STE 611		FEC Identification Number C [ ] <b>Transaction ID : SB902146</b> Amount of Each Disbursement this Period [ ] 565.70
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement PAYROLL		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FLAVIN, KATHY, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2018
Mailing Address 1730 M STREET STE 611		FEC Identification Number C [ ] <b>Transaction ID : SB9025844</b> Amount of Each Disbursement this Period [ ] 565.70
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement PAYROLL		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. TINSLEY, SARAH, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2018
Mailing Address 1730 M STREET STE 611		FEC Identification Number C [ ] <b>Transaction ID : SB222258</b> Amount of Each Disbursement this Period [ ] 1105.12
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement PAYROLL		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

2236.52

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2018

FEC Identification Number

C

Transaction ID : SB565288

Amount of Each Disbursement this Period

279.86

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2018

FEC Identification Number

C

Transaction ID : SB565753

Amount of Each Disbursement this Period

1090.57

Memo Item

Full Name (Last, First, Middle Initial)

**C. BAKER & HOSTETLER**

Mailing Address PO BOX 70189

City CLEVELAND State OH Zip Code 44190

Purpose of Disbursement  
LEGAL CONSULTING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2018

FEC Identification Number

C

Transaction ID : SB75420

Amount of Each Disbursement this Period

575.00

Memo Item

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

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

1945.43

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. BB&T INSURANCE SERVICES**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 890635

M M M	/	D D D	/	Y Y Y Y Y
05		25		2018

City  
CHARLOTTE

State  
NC

Zip Code  
28289

FEC Identification Number

Purpose of Disbursement  
INSURANCE

C
---

Candidate Name

Category/  
Type

**Transaction ID : SB458000**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

5329.50
---------

State: District:

Memo Item

**B. CANON FINANCIAL SERVICES INC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 14904 COLLECTIONS CENTER DRIVE

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

City  
CHICAGO

State  
IL

Zip Code  
60693

FEC Identification Number

Purpose of Disbursement  
EQUIPMENT LEASE

C
---

Candidate Name

Category/  
Type

**Transaction ID : SB410321**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

195.64
--------

State: District:

Memo Item

**C. CMDI**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1593 SPRING HILL ROAD  
STE 400

M M M	/	D D D	/	Y Y Y Y Y
04		24		2018

City  
TYSONS CORNER

State  
VA

Zip Code  
22182

FEC Identification Number

Purpose of Disbursement  
DATA MANAGEMENT SERVICES

C
---

Candidate Name

Category/  
Type

**Transaction ID : SB95555**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

50.00
-------

State: District:

Memo Item

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

5575.14
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATA MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB986100

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. COMCAST**

Mailing Address 1701 JFK BLVD

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB65821

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. COMPLIANCE CONSULTING LLC**

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB878744

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 S. SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB6363220

Amount of Each Disbursement this Period: 311.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. INTUIT**

Mailing Address 2700 COAST AVE

City MOUNTAIN VIEW State CA Zip Code 94943

Purpose of Disbursement ACCOUNTING SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2018

FEC Identification Number: C

Transaction ID : SB783102

Amount of Each Disbursement this Period: 52.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. PRISMGROUP**

Mailing Address 4910 ALBEMARLE ST NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement COMMUNICATIONS STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2018

FEC Identification Number: C

Transaction ID : SB9817584

Amount of Each Disbursement this Period: 21711.47

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 22075.55

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. U.S. POSTAL SERVICE</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2018
Mailing Address 8409 LEE HIGHWAY		FEC Identification Number C [REDACTED] <b>Transaction ID : SB8540037</b> Amount of Each Disbursement this Period [REDACTED] 164.87
City MERRIFIELD	State VA	Zip Code 22116
Purpose of Disbursement POSTAGE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UNITED BUSINESS TECHNOLOGIES</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address 9218 GAITHER ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB403040</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City GAITHERSBURG	State MD	Zip Code 20877
Purpose of Disbursement EQUIPMENT LEASE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address PO BOX 25505		FEC Identification Number C [REDACTED] <b>Transaction ID : SB666611</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City LEHIGH VALLEY	State PA	Zip Code 18002
Purpose of Disbursement WIRELESS TELEPHONE SERVICE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

914.87

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. YUMA SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 601 S. FREMONT AVENUE

City TAMPA State FL Zip Code 33606

Purpose of Disbursement  
COMPUTER SERVICES/SUPPORT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY  
05 / 25 / 2018

FEC Identification Number: C

Transaction ID : SB22210314

Amount of Each Disbursement this Period: 766.01

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 766.01

**TOTAL** This Period (last page this line number only)..... ▶ 48632.83