

# 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**

**MISES PAC**

ADDRESS (number and street) **P.O. BOX 2183**

Check if different than previously reported. (ACC) **NORRISTOWN PA 19401**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**C C00699785** 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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- 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  /  /  2019 through  /  /  2019

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

Signature of Treasurer BOWEN, RICH, , , JR. [Electronically Filed] Date  /  /  2020

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

**MISES PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3048.47"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="14242.43"/>	<input type="text" value="17430.78"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="17290.90"/>	<input type="text" value="17430.78"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11289.85"/>	<input type="text" value="11429.73"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6001.05"/>	<input type="text" value="6001.05"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**MISES PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2019 To: M M / D D / Y Y Y Y 12 / 31 / 2019

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).....	2397.64	3405.42
(ii) Unitemized .....	11844.79	14025.36
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14242.43	17430.78
(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) .....	14242.43	17430.78
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	14242.43	17430.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	14242.43	17430.78

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4330.65	4470.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4330.65	4470.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	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).....	6959.20	6959.20
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)) ..	11289.85	11429.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11289.85	11429.73

**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) .....	14242.43	17430.78
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14242.43	17430.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4330.65	4470.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4330.65	4470.53

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

THIS AMENDMENT IS IN RESPONSE TO THE REQUEST FOR ADDITIONAL INFORMATION DATED MAY 14, 2020. TRANSACTIONS IN EXCESS OF \$200 IN AGGREGATE ARE ITEMIZED ON THIS REPORT. THE UNITEMIZED RECEIPTS PREVIOUSLY REPORTED ON LINE 11AI HAVE BEEN MOVED TO 11AII. DISBURSEMENTS UNDER \$200 IN AGGREGATE DO NOT ITEMIZE ON LINE 21(B). ALL ITEMIZED DISBURSEMENTS INCLUDE PURPOSES AND COLUMN B OF THE SUMMARY AND DETAILED SUMMARY PAGES HAVE BEEN CORRECTED TO REFLECT THE YEAR TO DATE TOTALS.

Form/Schedule:  
Transaction ID:

**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 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. MITCHELL, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 209 TRACY LN  
 City VICTORIA State TX Zip Code 77904-1525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VICTORIA DODGE Occupation (for Individual) DETAILER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 332.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2019  
**Transaction ID : A4F3F552F23C94760A0E**  
 Amount of Each Receipt this Period  
 332.02  
 Memo Item

**B. SAWYER, ERIK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 71 PUPKIS RD.  
 City TEWKSBURY State MA Zip Code 01876-4070  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) T.J. MCCARTNEY Occupation (for Individual) CARPENTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2019  
**Transaction ID : AD4EC128944934085A7F**  
 Amount of Each Receipt this Period  
 220.02  
 Memo Item

**C. MASON, AARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 104 K STREET  
 City REXBURG State ID Zip Code 83440-1438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HB BOYS LC Occupation (for Individual) STORE MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 252.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2019  
**Transaction ID : AE77834A107C74E76947**  
 Amount of Each Receipt this Period  
 252.78  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	804.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. SABRIN, MURRAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 PALISADE AVE. APT. 2F  
 City FORT LEE State NJ Zip Code 07024-5327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RAMAPO COLLEGE Occupation (for Individual) PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 379.68

Date of Receipt 07 / 23 / 2019  
**Transaction ID : A4FC716FF4CC14ED5B83**  
 Amount of Each Receipt this Period 379.68  
 Memo Item

**B. DINCHER, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 PORTERS HILL ROAD  
 City TRUMBULL State CT Zip Code 06611-1435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MYEYEDR. Occupation (for Individual) OPTOMETRIC PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 07 / 29 / 2019  
**Transaction ID : AE745B9D4D5DD4C16813**  
 Amount of Each Receipt this Period 259.00  
 Memo Item

**C. SANTOS, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 141 BREEZY KNOLL DR.  
 City MYSTIC State CT Zip Code 06355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ENCORE BOSTON HARBOR Occupation (for Individual) CASINO TABLE GAMES MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2019  
**Transaction ID : A3156F916ADBF42FAA57**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	888.68
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 9 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. HASELOFF, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4320 LAURIE MICHELLE ROAD  
 City SAN ANTONIO State TX Zip Code 78261-1821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US NAVY, USAA Occupation (for Individual) PROCUREMENT MGR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.06

Date of Receipt **09 / 20 / 2019**  
**Transaction ID : A0A7AD433A1E64349AC7**  
 Amount of Each Receipt this Period 426.06  
 Memo Item

**B. TAYLOR, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7542 EAST 24TH STREET  
 City TUCSON State AZ Zip Code 85710-6348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) NA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 278.08

Date of Receipt **10 / 29 / 2019**  
**Transaction ID : ABAB23CD63775436AA20**  
 Amount of Each Receipt this Period 278.08  
 Memo Item

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

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	704.14
<b>TOTAL</b> This Period (last page this line number only).....	2397.64

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. LIBERTARIAN PARTY**

Full Name (Last, First, Middle Initial)

Mailing Address 1444 DUKE STREET

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-3403

Purpose of Disbursement  
CONVENTION REGISTRATION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2019			

FEC Identification Number

**C** [REDACTED]

Transaction ID : B023B72D01I

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item

**B. HARRIS, AARON, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1100 GAINSBOROUGH ROAD

City  
DAYTON

State  
OH

Zip Code  
45419-2834

Purpose of Disbursement  
EMAIL MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2019			

FEC Identification Number

**C** [REDACTED]

Transaction ID : B49B2D2C4E

Amount of Each Disbursement this Period

[REDACTED] 406.10

Memo Item

**C. BASTION MAGAZINE**

Full Name (Last, First, Middle Initial)

Mailing Address 2784 PRESTWICK DRIVE

City  
ROSEVILLE

State  
CA

Zip Code  
95661-5169

Purpose of Disbursement  
WEBSITE DEVELOPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			16			2019			

FEC Identification Number

**C** [REDACTED]

Transaction ID : BE6FDB112C

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

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

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

[REDACTED] 2156.10

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

Full Name (Last, First, Middle Initial)

**A. BLUEHOST**

Mailing Address 10 CORPORATE DRIVE  
SUITE 300

City BURLINGTON State MA Zip Code 01803-4200

Purpose of Disbursement  
WEBHOSTING BILL

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 16 / 2019

FEC Identification Number

C  
Transaction ID : B9F14EE65D  
Amount of Each Disbursement this Period  
367.37

Memo Item

Full Name (Last, First, Middle Initial)

**B. EZTEXTING.COM**

Mailing Address 1410 2ND STREET SUITE 200

City SANTA MONICA State CA Zip Code 90401-3349

Purpose of Disbursement  
TEXTING APP

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 30 / 2019

FEC Identification Number

C  
Transaction ID : B15ED7C680I  
Amount of Each Disbursement this Period  
470.40

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 510 TOWNSEND STREET

City SAN FRANCISCO State CA Zip Code 94103-4918

Purpose of Disbursement  
FEES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

FEC Identification Number

C  
Transaction ID : B3EA10065B  
Amount of Each Disbursement this Period  
692.05

Memo Item

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

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

1529.82

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. ATLANTIC UNION BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 1051 EAST CARY STREET  
SUITE 1200

City RICHMOND State VA Zip Code 23219-4044

Purpose of Disbursement BANK CHARGES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

FEC Identification Number: C

Transaction ID : B9B816FFBC

Amount of Each Disbursement this Period: 218.94

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) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**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) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	218.94
<b>TOTAL</b> This Period (last page this line number only).....▶	3904.86

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

Full Name (Last, First, Middle Initial)

**A. CHASE TKACH FOR COUNTY AT LARGE**

Mailing Address 1767 OAK ORCHARD ROAD

City ALBION State NY Zip Code 14411-9005

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2019  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B6296367C6/**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. MAJ TOURE FOR COUNCILMAN AT LARGE**

Mailing Address 258 E GIRARD AVENUE

City PHILADELPHIA State PA Zip Code 19125-3945

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2019  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BEFF3BA2E0**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. BOWEN FOR CHERRY HILL TOWN COUNCIL**

Mailing Address P.O. BOX 3333

City CHERRY HILL State NJ Zip Code 08034-0318

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2019  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BA3F5618DE**  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. JOSHUA SMITH FOR LNC CHAIR**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 412 BAYVIEW DRIVE

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2019			

City  
OAKLEY

State  
CA

Zip Code  
94561-3228

FEC Identification Number

Purpose of Disbursement  
DIRECT CONTRIBUTION

C
---

Transaction ID : **BD8F163557I**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

664.94
--------

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2020

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Memo Item

State:

District:

**B. SHANE LEMLER FOR VINCENNES CITY COUNCIL**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 208 S 8TH STREET

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2019			

City  
VINCENNES

State  
IN

Zip Code  
47591-2804

FEC Identification Number

Purpose of Disbursement  
DIRECT CONTRIBUTION

C
---

Transaction ID : **B3AB12F5EE**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

250.00
--------

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2019

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Memo Item

State:

District:

**C. JENNIFER FLOWER FOR PRAIRIE TWP BOARD OF TRUSTEES**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8524 BLUE LAKE AVENUE

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2019			

City  
GALLOWAY

State  
OH

Zip Code  
43119-9409

FEC Identification Number

Purpose of Disbursement  
DIRECT CONTRIBUTION

C
---

Transaction ID : **BF9A3A8376**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

250.00
--------

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2019

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Memo Item

State:

District:

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

1164.94
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

Full Name (Last, First, Middle Initial) <b>A. ADAM THOMPSON FOR MURRAY CITY COUNCIL</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2019
Mailing Address 831 E THREE FOUNTAINS DRIVE UNIT 2		FEC Identification Number C [REDACTED] <b>Transaction ID : B7F3D16002!</b> Amount of Each Disbursement this Period [REDACTED] 524.80
City SALT LAKE CITY	State UT	Zip Code 84107-5266
Purpose of Disbursement DIRECT CONTRIBUTION		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2019 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ROBERT LEIST FOR COSHOCTON CITY COUNCIL</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2019
Mailing Address 2099 BUENA VISTA DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : B1A4AD0CC/</b> Amount of Each Disbursement this Period [REDACTED] 1024.46
City COSHOCTON	State OH	Zip Code 43812-3012
Purpose of Disbursement DIRECT CONTRIBUTION		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2019 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. KALISH MORROW FOR HANFORD CITY COUNCIL</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2019
Mailing Address 1963 ROLAND DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : B1D98B19BC</b> Amount of Each Disbursement this Period [REDACTED] 750.00
City HANFORD	State CA	Zip Code 93230-1937
Purpose of Disbursement DIRECT CONTRIBUTION		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 2299.26

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

Full Name (Last, First, Middle Initial) <b>A. ST. FLEUR FOR MAYOR</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2019	
Mailing Address 626 SPRUCE STREET			
City SCRANTON	State PA	Zip Code 18503-1810	
Purpose of Disbursement DIRECT CONTRIBUTION		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2019 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	Transaction ID : <b>B2C01D54CA</b> Amount of Each Disbursement this Period 1000.00	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:	Amount of Each Disbursement this Period	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:	Amount of Each Disbursement this Period	
		<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6959.20