

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) PO 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)
 - Jan 31 (YE)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)
- Election on M M / D D / Y Y Y Y Y Y in the State of
- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)
- Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2021 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2021

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

Signature of Treasurer HEISE, MICHAEL, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 04 / 11 / 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.

**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="2021"/>	<input type="text" value=""/>	<input type="text" value="10919.95"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24634.97"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="120193.61"/>	<input type="text" value="267230.68"/>
(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="144828.58"/>	<input type="text" value="278150.63"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="131017.97"/>	<input type="text" value="264340.02"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13810.61"/>	<input type="text" value="13810.61"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

MISES PAC

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

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).....	51533.13	97690.68
(ii) Unitemized	68660.48	169540.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	120193.61	267230.68
(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)	120193.61	267230.68
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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)).....▶	120193.61	267230.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	120193.61	267230.68

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	125782.64	243144.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	125782.64	243144.69
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).....	5235.33	21195.33
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)) ..	131017.97	264340.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131017.97	264340.02

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	120193.61	267230.68
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	120193.61	267230.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	125782.64	243144.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	125782.64	243144.69

**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 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. ADAMS, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 CIELO ABIERTO WAY
724

City HENDERSON State NV Zip Code 89012

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

Name of Employer (for Individual) VMWARE Occupation (for Individual) SOFTWARE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.40

Date of Receipt 10 / 06 / 2021
Transaction ID : A-15750

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

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

Mailing Address 160 CIELO ABIERTO WAY
724

City HENDERSON State NV Zip Code 89012

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

Name of Employer (for Individual) VMWARE Occupation (for Individual) SOFTWARE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.40

Date of Receipt 11 / 06 / 2021
Transaction ID : A-15748

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

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

Mailing Address 160 CIELO ABIERTO WAY
724

City HENDERSON State NV Zip Code 89012

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

Name of Employer (for Individual) VMWARE Occupation (for Individual) SOFTWARE ENGINEER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 252.40

Date of Receipt 11 / 06 / 2021
Transaction ID : A-15749

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ADAMS, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 CIELO ABIERTO WAY
 724
 City HENDERSON State NV Zip Code 89012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VMWARE Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.40

Date of Receipt **12 / 06 / 2021**
Transaction ID : A-15747
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ADSIT, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1447 LANGSTON ROAD
 City RIVERTON State UT Zip Code 84065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMMERSION LEARNING Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 17 / 2021**
Transaction ID : A-15765
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ADSIT, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1447 LANGSTON ROAD
 City RIVERTON State UT Zip Code 84065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMMERSION LEARNING Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 17 / 2021**
Transaction ID : A-15764
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 8 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ADSIT, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1447 LANGSTON ROAD
 City RIVERTON State UT Zip Code 84065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMMERSION LEARNING Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 17 / 2021
Transaction ID : A-15763
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ADSIT, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1447 LANGSTON ROAD
 City RIVERTON State UT Zip Code 84065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMMERSION LEARNING Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 17 / 2021
Transaction ID : A-15762
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ADSIT, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1447 LANGSTON ROAD
 City RIVERTON State UT Zip Code 84065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMMERSION LEARNING Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 17 / 2021
Transaction ID : A-15761
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ADSIT, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1447 LANGSTON ROAD

City RIVERTON	State UT	Zip Code 84065
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMMERSON LEARNING	Occupation (for Individual) CTO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2021

Transaction ID : A-15760

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 315 CHADWICK DR

City AURORA	State OH	Zip Code 44202-6633
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOE ALBANESE	Occupation (for Individual) CLOUD ARCHITECT
---	--

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
07 / 17 / 2021

Transaction ID : A-15770

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 315 CHADWICK DR

City AURORA	State OH	Zip Code 44202-6633
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOE ALBANESE	Occupation (for Individual) CLOUD ARCHITECT
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2021

Transaction ID : A-15769

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALBANESE, JOSEPH, , ,

Mailing Address 315 CHADWICK DR

City AURORA	State OH	Zip Code 44202-6633
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOE ALBANESE	Occupation (for Individual) CLOUD ARCHITECT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2021

Transaction ID : A-15768

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 315 CHADWICK DR

City AURORA	State OH	Zip Code 44202-6633
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOE ALBANESE	Occupation (for Individual) CLOUD ARCHITECT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2021

Transaction ID : A-15767

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 315 CHADWICK DR

City AURORA	State OH	Zip Code 44202-6633
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOE ALBANESE	Occupation (for Individual) CLOUD ARCHITECT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2021

Transaction ID : A-15766

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALLEN, MATTHEW, , ,

Mailing Address 10561 SPRINGGLEN COURT

City BATON ROUGE State LA Zip Code 70810

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

Name of Employer (for Individual) SHELL CHEMICAL Occupation (for Individual) OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2021

Transaction ID : A-15788

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 10561 SPRINGGLEN COURT

City BATON ROUGE State LA Zip Code 70810

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

Name of Employer (for Individual) SHELL CHEMICAL Occupation (for Individual) OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 17 / 2021

Transaction ID : A-15787

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 10561 SPRINGGLEN COURT

City BATON ROUGE State LA Zip Code 70810

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

Name of Employer (for Individual) SHELL CHEMICAL Occupation (for Individual) OPERATOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2021

Transaction ID : A-15786

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALON, AVISHAY, , ,

Mailing Address 21 JEFFERSON DR

City DOVER	State NH	Zip Code 03820
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICROSOFT INC.	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		19		2021

Transaction ID : A-15799

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 21 JEFFERSON DR

City DOVER	State NH	Zip Code 03820
---------------	-------------	-------------------

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

Name of Employer (for Individual) MICROSOFT INC.	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		19		2021

Transaction ID : A-15798

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
528.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2021

Transaction ID : A-15833

Amount of Each Receipt this Period
68.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	118.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALVSTAD, GARY, , ,

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
548.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2021

Transaction ID : A-15831

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
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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 ▼
548.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2021

Transaction ID : A-15832

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2021

Transaction ID : A-15830

Amount of Each Receipt this Period
68.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	88.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALVSTAD, GARY, , ,

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
636.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2021

Transaction ID : A-15828

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
636.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2021

Transaction ID : A-15829

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
704.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2021

Transaction ID : A-15827

Amount of Each Receipt this Period
68.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	88.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALVSTAD, GARY, , ,

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
724.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2021

Transaction ID : A-15825

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
724.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2021

Transaction ID : A-15826

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
792.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2021

Transaction ID : A-15824

Amount of Each Receipt this Period
68.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	88.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALVSTAD, GARY, , ,

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
812.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

Transaction ID : A-15822

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
812.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

Transaction ID : A-15823

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2021

Transaction ID : A-15821

Amount of Each Receipt this Period
68.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	88.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 17 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALVSTAD, GARY, , ,

Mailing Address 2220 COLLIER COURT

City TUSTIN State CA Zip Code 92782

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 ▼
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 20 / 2021

Transaction ID : A-15819

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN State CA Zip Code 92782

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 ▼
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 20 / 2021

Transaction ID : A-15820

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN State CA Zip Code 92782

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 ▼
968.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 13 / 2021

Transaction ID : A-15818

Amount of Each Receipt this Period
68.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 88.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALVSTAD, GARY, , ,

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
----------------	-------------	-------------------

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 ▼
988.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2021

Transaction ID : A-15816

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 2220 COLLIER COURT

City TUSTIN	State CA	Zip Code 92782
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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 ▼
988.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2021

Transaction ID : A-15817

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 617 WHITINGHAM DRIVE

City SILVER SPRING	State MD	Zip Code 20904
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NARA	Occupation (for Individual) ARCHIVES SPECIALIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2021

Transaction ID : A-15866

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ANOSKEY, DONNA, , ,

Mailing Address 617 WHITINGHAM DRIVE

City SILVER SPRING	State MD	Zip Code 20904
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NARA	Occupation (for Individual) ARCHIVES SPECIALIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		27		2021

Transaction ID : A-15865

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 24 PRESERVE WAY

City SARATOGA SPRINGS	State NY	Zip Code 12866
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) BAYER	Occupation (for Individual) ASSOCIATE DIRECTOR LEARNING A
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2021

Transaction ID : A-15902

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 24 PRESERVE WAY

City SARATOGA SPRINGS	State NY	Zip Code 12866
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) BAYER	Occupation (for Individual) ASSOCIATE DIRECTOR LEARNING AI
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		17		2021

Transaction ID : A-15901

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ARRIGO, ROB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PRESERVE WAY
 City SARATOGA SPRINGS State NY Zip Code 12866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAYER Occupation (for Individual) ASSOCIATE DIRECTOR LEARNING A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 17 / 2021
Transaction ID : A-15900
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ARRIGO, ROB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PRESERVE WAY
 City SARATOGA SPRINGS State NY Zip Code 12866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAYER Occupation (for Individual) ASSOCIATE DIRECTOR LEARNING A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 17 / 2021
Transaction ID : A-15899
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BAKER, JOSIAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1232 PARADISE HILL ROAD
 City CLARKSVILLE State TN Zip Code 37040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 22 / 2021
Transaction ID : A-15964
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BAKER, JOSIAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1232 PARADISE HILL ROAD

City CLARKSVILLE	State TN	Zip Code 37040
---------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2021

Transaction ID : A-15963

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BAKER, JOSIAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1232 PARADISE HILL ROAD

City CLARKSVILLE	State TN	Zip Code 37040
---------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2021

Transaction ID : A-15962

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BARNARD, ADAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 MAYO STREET
B2

City RALEIGH, NC	State NC	Zip Code 27603
---------------------	-------------	-------------------

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

Name of Employer (for Individual) FAIRVIEW LLC	Occupation (for Individual) FINANCIAL REPORTING
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2021

Transaction ID : A-16004

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 525
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BARNARD, ADAM, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2021
Mailing Address 20 MAYO STREET B2			Transaction ID : A-16003
City RALEIGH, NC	State NC	Zip Code 27603	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) FAIRVIEW LLC		Occupation (for Individual) FINANCIAL REPORTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BARNARD, ADAM, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 17 / 2021
Mailing Address 20 MAYO STREET B2			Transaction ID : A-16002
City RALEIGH, NC	State NC	Zip Code 27603	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) FAIRVIEW LLC		Occupation (for Individual) FINANCIAL REPORTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BARNARD, ADAM, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2021
Mailing Address 20 MAYO STREET B2			Transaction ID : A-16001
City RALEIGH, NC	State NC	Zip Code 27603	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) FAIRVIEW LLC		Occupation (for Individual) FINANCIAL REPORTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BEEBE, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1228 SARAH JANE COURT
 City AUBURN State MI Zip Code 48611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TPS Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 13 / 2021**
Transaction ID : A-16074
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. BEEBE, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1228 SARAH JANE COURT
 City AUBURN State MI Zip Code 48611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TPS Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 13 / 2021**
Transaction ID : A-16073
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. BEEBE, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1228 SARAH JANE COURT
 City AUBURN State MI Zip Code 48611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TPS Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **09 / 13 / 2021**
Transaction ID : A-16072
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BEEBE, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1228 SARAH JANE COURT

City AUBURN	State MI	Zip Code 48611
----------------	-------------	-------------------

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

Name of Employer (for Individual) TPS	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2021

Transaction ID : A-16071

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 4744 WEST EAST ROSS PARKWAY
51 - 202

City SOUTHAVEN	State MS	Zip Code 38671
-------------------	-------------	-------------------

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

Name of Employer (for Individual) AT&T	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
317.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2021

Transaction ID : A-16095

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 4744 WEST EAST ROSS PARKWAY
51 - 202

City SOUTHAVEN	State MS	Zip Code 38671
-------------------	-------------	-------------------

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

Name of Employer (for Individual) AT&T	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
367.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2021

Transaction ID : A-16094

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. BENDINELLI, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4744 WEST EAST ROSS PARKWAY
 51 - 202
 City SOUTHAVEN State MS Zip Code 38671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.40

Date of Receipt **09 / 18 / 2021**
Transaction ID : A-16093
 Amount of Each Receipt this Period 60.00
 Memo Item
CONTRIBUTION

B. BENDINELLI, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4744 WEST EAST ROSS PARKWAY
 51 - 202
 City SOUTHAVEN State MS Zip Code 38671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 487.40

Date of Receipt **10 / 18 / 2021**
Transaction ID : A-16092
 Amount of Each Receipt this Period 60.00
 Memo Item
CONTRIBUTION

C. BENDINELLI, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4744 WEST EAST ROSS PARKWAY
 51 - 202
 City SOUTHAVEN State MS Zip Code 38671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 547.40

Date of Receipt **11 / 18 / 2021**
Transaction ID : A-16091
 Amount of Each Receipt this Period 60.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 26 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BENDINELLI, LAURENCE, , ,

Mailing Address 4744 WEST EAST ROSS PARKWAY
51 - 202

City SOUTHAVEN State MS Zip Code 38671

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

Name of Employer (for Individual) AT&T Occupation (for Individual) SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
607.40

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2021

Transaction ID : A-16090

Amount of Each Receipt this Period
60.00

Memo Item
CONTRIBUTION

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

Mailing Address 766 N 15TH ST

City LARAMIE State WY Zip Code 82072

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

Name of Employer (for Individual) UNIVERSITY OF WYOMING Occupation (for Individual) STAFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 17 / 2021

Transaction ID : A-16115

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 766 N 15TH ST

City LARAMIE State WY Zip Code 82072

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

Name of Employer (for Individual) UNIVERSITY OF WYOMING Occupation (for Individual) STAFF

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
219.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2021

Transaction ID : A-16114

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BERGMAIER, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 766 N 15TH ST
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WYOMING Occupation (for Individual) STAFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt 10 / 17 / 2021
Transaction ID : A-16113
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. BERGMAIER, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 766 N 15TH ST
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WYOMING Occupation (for Individual) STAFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 239.00

Date of Receipt 11 / 17 / 2021
Transaction ID : A-16112
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. BERGMAIER, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 766 N 15TH ST
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WYOMING Occupation (for Individual) STAFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt 12 / 17 / 2021
Transaction ID : A-16111
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BESADA, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2899 COLLINS AVENUE
 City MIAMI BEACH State FL Zip Code 33140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AKVELON Occupation (for Individual) SOFTWARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 04 / 2021
Transaction ID : A-16124
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

B. BESADA, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2899 COLLINS AVENUE
 City MIAMI BEACH State FL Zip Code 33140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AKVELON Occupation (for Individual) SOFTWARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 04 / 2021
Transaction ID : A-16123
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

C. BITNER, ZAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2644 NORTH RICHMOND STREET
 City CHICAGO State IL Zip Code 60647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ZACHARY A DESIGN Occupation (for Individual) FURNITURE DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2021
Transaction ID : A-16155
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BITNER, ZAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2644 NORTH RICHMOND STREET
 City CHICAGO State IL Zip Code 60647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ZACHARY A DESIGN Occupation (for Individual) FURNITURE DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2021
Transaction ID : A-16154
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BITNER, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2644 N RICHMOND ST
 City CHICAGO State IL Zip Code 60647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ZACHARY A. DESIGN LLC Occupation (for Individual) FURNITURE DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 29 / 2021
Transaction ID : A-16158
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BITNER, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2644 N RICHMOND ST
 City CHICAGO State IL Zip Code 60647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ZACHARY A. DESIGN LLC Occupation (for Individual) FURNITURE DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 29 / 2021
Transaction ID : A-16157
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 30 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BLACKWELDER, NINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 CRANFORD MILL DRIVE
 City NEWNAN State GA Zip Code 30265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 21 / 2021
Transaction ID : A-16173
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BLACKWELDER, NINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 CRANFORD MILL DRIVE
 City NEWNAN State GA Zip Code 30265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 24 / 2021
Transaction ID : A-16172
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BLANCHARD, DILLON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3191 STATE HWY 20 WEST
 City FREEPORT State FL Zip Code 32439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JORDAN AIR ENTERPRISES Occupation (for Individual) HVAC TECHNICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 17 / 2021
Transaction ID : A-16201
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 OF 525
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. BLANCHARD, DILLON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3191 STATE HWY 20 WEST

City FREEPORT	State FL	Zip Code 32439
------------------	-------------	-------------------

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

Name of Employer (for Individual) JORDAN AIR ENTERPRISES	Occupation (for Individual) HVAC TECHNICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2021

Transaction ID : A-16200

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 3191 STATE HWY 20 WEST

City FREEPORT	State FL	Zip Code 32439
------------------	-------------	-------------------

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

Name of Employer (for Individual) JORDAN AIR ENTERPRISES	Occupation (for Individual) HVAC TECHNICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2021

Transaction ID : A-16199

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 3191 STATE HWY 20 WEST

City FREEPORT	State FL	Zip Code 32439
------------------	-------------	-------------------

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

Name of Employer (for Individual) JORDAN AIR ENTERPRISES	Occupation (for Individual) HVAC TECHNICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2021

Transaction ID : A-16198

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BLANCHARD, DILLON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3191 STATE HWY 20 WEST
 City FREEPORT State FL Zip Code 32439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JORDAN AIR ENTERPRISES Occupation (for Individual) HVAC TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 17 / 2021
Transaction ID : A-16197
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BLANCHARD, DILLON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3191 STATE HWY 20 WEST
 City FREEPORT State FL Zip Code 32439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JORDAN AIR ENTERPRISES Occupation (for Individual) HVAC TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 17 / 2021
Transaction ID : A-16196
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOOKWALTER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7490 NORTH 1075 WEST
 City THORNTOWN State IN Zip Code 46071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTUITIVE Occupation (for Individual) SALES / ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 18 / 2021
Transaction ID : A-16252
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 33 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOOKWALTER, CHARLES, , ,

Mailing Address 7490 NORTH 1075 WEST

City THORNTOWN State IN Zip Code 46071

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

Name of Employer (for Individual) INTUITIVE Occupation (for Individual) SALES / ENTREPRENEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2021

Transaction ID : A-16251

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 7490 NORTH 1075 WEST

City THORNTOWN State IN Zip Code 46071

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

Name of Employer (for Individual) INTUITIVE Occupation (for Individual) SALES / ENTREPRENEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2021

Transaction ID : A-16250

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 7490 NORTH 1075 WEST

City THORNTOWN State IN Zip Code 46071

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

Name of Employer (for Individual) INTUITIVE Occupation (for Individual) SALES / ENTREPRENEUR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2021

Transaction ID : A-16249

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOOKWALTER, CHARLES, , ,

Mailing Address 7490 NORTH 1075 WEST

City THORNTOWN	State IN	Zip Code 46071
-------------------	-------------	-------------------

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

Name of Employer (for Individual) INTUITIVE	Occupation (for Individual) SALES / ENTREPRENEUR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2021

Transaction ID : A-16248

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 7490 NORTH 1075 WEST

City THORNTOWN	State IN	Zip Code 46071
-------------------	-------------	-------------------

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

Name of Employer (for Individual) INTUITIVE	Occupation (for Individual) SALES / ENTREPRENEUR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2021

Transaction ID : A-16247

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 3210 S. 198TH ST.

City SEATAC	State WA	Zip Code 98188
----------------	-------------	-------------------

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

Name of Employer (for Individual) BO	Occupation (for Individual) VEHICLE MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
208.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2021

Transaction ID : A-16303

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	126.06
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 35 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BOWEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3210 S. 198TH ST.
 City SEATAC State WA Zip Code 98188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BO Occupation (for Individual) VEHICLE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.54

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2021
Transaction ID : A-16302
 Amount of Each Receipt this Period 26.06
 Memo Item
 CONTRIBUTION

B. BOWEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3210 S. 198TH ST.
 City SEATAC State WA Zip Code 98188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BO Occupation (for Individual) VEHICLE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2021
Transaction ID : A-16301
 Amount of Each Receipt this Period 26.06
 Memo Item
 CONTRIBUTION

C. BOWEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3210 S. 198TH ST.
 City SEATAC State WA Zip Code 98188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BO Occupation (for Individual) VEHICLE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2021
Transaction ID : A-16300
 Amount of Each Receipt this Period 26.06
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.18
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BOWEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3210 S. 198TH ST.
 City SEATAC State WA Zip Code 98188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BO Occupation (for Individual) VEHICLE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2021
Transaction ID : A-16299
 Amount of Each Receipt this Period
 26.06
 Memo Item
CONTRIBUTION

B. BOZZACCO, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 EDGE HILL RD
 City GLENSIDE State PA Zip Code 19038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOR-MAR Occupation (for Individual) HVAC TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2021
Transaction ID : A-16336
 Amount of Each Receipt this Period
 30.00
 Memo Item
CONTRIBUTION

C. BOZZACCO, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 EDGE HILL RD
 City GLENSIDE State PA Zip Code 19038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOR-MAR Occupation (for Individual) HVAC TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2021
Transaction ID : A-16335
 Amount of Each Receipt this Period
 30.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	86.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOZZACCO, MARC, , ,

Mailing Address 103 EDGE HILL RD

City GLENSIDE	State PA	Zip Code 19038
------------------	-------------	-------------------

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

Name of Employer (for Individual) LOR-MAR	Occupation (for Individual) HVAC TECHNICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2021

Transaction ID : A-16334

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

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

Mailing Address 103 EDGE HILL RD

City GLENSIDE	State PA	Zip Code 19038
------------------	-------------	-------------------

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

Name of Employer (for Individual) LOR-MAR	Occupation (for Individual) HVAC TECHNICIAN
--	--

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
10		06		2021

Transaction ID : A-16333

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

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

Mailing Address 103 EDGE HILL RD

City GLENSIDE	State PA	Zip Code 19038
------------------	-------------	-------------------

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

Name of Employer (for Individual) LOR-MAR	Occupation (for Individual) HVAC TECHNICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2021

Transaction ID : A-16332

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BOZZACCO, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 EDGE HILL RD
 City GLENSIDE State PA Zip Code 19038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOR-MAR Occupation (for Individual) HVAC TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **12 / 06 / 2021**
Transaction ID : A-16331
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BRACCO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8209 PERIDOT DR 406
 City MCLEAN State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL HOME LOAN MORTGAGE CORPORATION Occupation (for Individual) DATA ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 394.98

Date of Receipt **07 / 20 / 2021**
Transaction ID : A-16342
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BRACCO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8209 PERIDOT DR 406
 City MCLEAN State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL HOME LOAN MORTGAGE CORPORATION Occupation (for Individual) DATA ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 419.98

Date of Receipt **08 / 20 / 2021**
Transaction ID : A-16341
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRACCO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8209 PERIDOT DR
 406
 City MCLEAN State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FEDERAL HOME LOAN MORTGAGE CORPORATION DATA ANALYST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 444.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2021
Transaction ID : A-16340
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BRACCO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8209 PERIDOT DR
 406
 City MCLEAN State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FEDERAL HOME LOAN MORTGAGE CORPORATION DATA ANALYST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 469.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2021
Transaction ID : A-16339
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRACCO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8209 PERIDOT DR
 406
 City MCLEAN State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FEDERAL HOME LOAN MORTGAGE CORPORATION DATA ANALYST
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 494.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2021
Transaction ID : A-16338
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRACCO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8209 PERIDOT DR
 406
 City MCLEAN State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL HOME LOAN MORTGAGE CORPORATION Occupation (for Individual) DATA ANALYST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 519.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2021
Transaction ID : A-16337
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BRADLEY, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10149 ROSE WILLOW LANE
 City BROOKSHIRE State TX Zip Code 77423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) CITY CARRIER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2021
Transaction ID : A-16346
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRADLEY, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10149 ROSE WILLOW LANE
 City BROOKSHIRE State TX Zip Code 77423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) CITY CARRIER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2021
Transaction ID : A-16345
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRADLEY, JACOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10149 ROSE WILLOW LANE

City BROOKSHIRE	State TX	Zip Code 77423
--------------------	-------------	-------------------

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

Name of Employer (for Individual) USPS	Occupation (for Individual) CITY CARRIER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2021

Transaction ID : A-16344

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 10149 ROSE WILLOW LANE

City BROOKSHIRE	State TX	Zip Code 77423
--------------------	-------------	-------------------

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

Name of Employer (for Individual) USPS	Occupation (for Individual) CITY CARRIER
---	---

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
12	/	21	/	2021

Transaction ID : A-16343

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 1701 HOMESTEAD ROAD

City SANTA CLARA	State CA	Zip Code 95050
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ROSENDIN ELEC	Occupation (for Individual) ELECTRICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2021

Transaction ID : A-16358

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRADY, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HOMESTEAD ROAD
 City SANTA CLARA State CA Zip Code 95050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSENDIN ELEC Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2021
Transaction ID : A-16357
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRADY, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HOMESTEAD ROAD
 City SANTA CLARA State CA Zip Code 95050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSENDIN ELEC Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2021
Transaction ID : A-16356
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BRADY, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HOMESTEAD ROAD
 City SANTA CLARA State CA Zip Code 95050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSENDIN ELEC Occupation (for Individual) ELECTRICIAN
 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
 12 / 23 / 2021
Transaction ID : A-16355
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRENNAN, SEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 CARTIER STREET
1

City MANCHESTER State NH Zip Code 03102

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

Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE APPRAISER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.39

Date of Receipt
MM / DD / YYYY
09 / 03 / 2021

Transaction ID : A-16411

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

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

Mailing Address 207 CARTIER STREET
1

City MANCHESTER State NH Zip Code 03102

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

Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE APPRAISER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.39

Date of Receipt
MM / DD / YYYY
10 / 03 / 2021

Transaction ID : A-16410

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

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

Mailing Address 207 CARTIER STREET
1

City MANCHESTER State NH Zip Code 03102

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

Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE APPRAISER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
237.39

Date of Receipt
MM / DD / YYYY
11 / 03 / 2021

Transaction ID : A-16409

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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

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

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

FOR LINE NUMBER: PAGE 44 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRENNAN, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 CARTIER STREET
 1
 City MANCHESTER State NH Zip Code 03102
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2021
Transaction ID : A-16408
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

B. BRIDE, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 WALNUT STREET
 312
 City DENVER State CO Zip Code 80205
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RED HAT / IBM Occupation (for Individual) SOFTWARE ENGINEER
 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
 07 / 25 / 2021
Transaction ID : A-16419
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BRIDE, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 WALNUT STREET
 312
 City DENVER State CO Zip Code 80205
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RED HAT / IBM Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2021
Transaction ID : A-16418
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 215.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 45 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRIDE, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 WALNUT STREET
 312
 City DENVER State CO Zip Code 80205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RED HAT / IBM SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2021
Transaction ID : A-16417
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BRIDE, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 WALNUT STREET
 312
 City DENVER State CO Zip Code 80205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RED HAT / IBM SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2021
Transaction ID : A-16416
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BRIDE, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 WALNUT STREET
 312
 City DENVER State CO Zip Code 80205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RED HAT / IBM SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2021
Transaction ID : A-16415
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRIDE, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 WALNUT STREET
 312
 City DENVER State CO Zip Code 80205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED HAT / IBM Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 25 / 2021
Transaction ID : A-16414
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BRODERSEN, AUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3402 OAKMONT DR
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WARREN CAT Occupation (for Individual) FIELD SERVICE TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2021
Transaction ID : A-16450
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRODERSEN, AUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3402 OAKMONT DR
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WARREN CAT Occupation (for Individual) FIELD SERVICE TECH
 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
 10 / 20 / 2021
Transaction ID : A-16449
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BRODERSEN, AUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3402 OAKMONT DR
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WARREN CAT Occupation (for Individual) FIELD SERVICE TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2021
Transaction ID : A-16448
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRODERSEN, AUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3402 OAKMONT DR
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WARREN CAT Occupation (for Individual) FIELD SERVICE TECH
 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
 12 / 20 / 2021
Transaction ID : A-16447
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BROWN, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3440 KENNEBUCK CT
 City RALEIGH State NC Zip Code 27613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VMWARE Occupation (for Individual) FEDERAL CLOUD OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 218.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2021
Transaction ID : A-16479
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BROWN, RYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3440 KENNEBUCK CT

City RALEIGH	State NC	Zip Code 27613
-----------------	-------------	-------------------

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

Name of Employer (for Individual) VMWARE	Occupation (for Individual) FEDERAL CLOUD OPERATIONS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2021

Transaction ID : A-16478

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 3440 KENNEBUCK CT

City RALEIGH	State NC	Zip Code 27613
-----------------	-------------	-------------------

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

Name of Employer (for Individual) VMWARE	Occupation (for Individual) FEDERAL CLOUD OPERATIONS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : A-16477

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 3440 KENNEBUCK CT

City RALEIGH	State NC	Zip Code 27613
-----------------	-------------	-------------------

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

Name of Employer (for Individual) VMWARE	Occupation (for Individual) FEDERAL CLOUD OPERATIONS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
293.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2021

Transaction ID : A-16476

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 49 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BROWN, RYAN, , ,

Mailing Address 3440 KENNEBUCK CT

City RALEIGH State NC Zip Code 27613

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

Name of Employer (for Individual) VMWARE Occupation (for Individual) FEDERAL CLOUD OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
318.14

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 09 / 2021

Transaction ID : A-16475

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 3440 KENNEBUCK CT

City RALEIGH State NC Zip Code 27613

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

Name of Employer (for Individual) VMWARE Occupation (for Individual) FEDERAL CLOUD OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
343.14

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 09 / 2021

Transaction ID : A-16474

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 3440 KENNEBUCK CT

City RALEIGH State NC Zip Code 27613

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

Name of Employer (for Individual) VMWARE Occupation (for Individual) FEDERAL CLOUD OPERATIONS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
363.36

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2021

Transaction ID : A-16473

Amount of Each Receipt this Period
20.22

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.22

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

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

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

FOR LINE NUMBER: PAGE 50 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BURTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NANCY DRIVE
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH QUALITY WHOLESALE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.88

Date of Receipt 09 / 25 / 2021
Transaction ID : A-16514
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BURTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NANCY DRIVE
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH QUALITY WHOLESALE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.49

Date of Receipt 09 / 28 / 2021
Transaction ID : A-16513
 Amount of Each Receipt this Period 10.61
 Memo Item CONTRIBUTION

C. BURTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NANCY DRIVE
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH QUALITY WHOLESALE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.49

Date of Receipt 10 / 25 / 2021
Transaction ID : A-16512
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.61
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 51 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BURTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NANCY DRIVE
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH QUALITY WHOLESALE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.10

Date of Receipt 10 / 28 / 2021
Transaction ID : A-16511
 Amount of Each Receipt this Period 10.61
 Memo Item CONTRIBUTION

B. BURTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NANCY DRIVE
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH QUALITY WHOLESALE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.10

Date of Receipt 11 / 25 / 2021
Transaction ID : A-16510
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BURTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NANCY DRIVE
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH QUALITY WHOLESALE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 291.71

Date of Receipt 11 / 28 / 2021
Transaction ID : A-16509
 Amount of Each Receipt this Period 10.61
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 46.22
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BURTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NANCY DRIVE
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH QUALITY WHOLESALE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.71

Date of Receipt 12 / 25 / 2021
Transaction ID : A-16508
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BURTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NANCY DRIVE
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH QUALITY WHOLESALE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.32

Date of Receipt 12 / 28 / 2021
Transaction ID : A-16507
 Amount of Each Receipt this Period 10.61
 Memo Item CONTRIBUTION

C. BYRD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 ANGLE LANE
 City MODESTO State CA Zip Code 95354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIED UNIVERSAL SECURITY SYSTEMS Occupation (for Individual) SECURITY GUARD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.30

Date of Receipt 07 / 12 / 2021
Transaction ID : A-16545
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 40.61
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BYRD, CHARLES, , ,

Mailing Address 130 ANGLE LANE

City MODESTO	State CA	Zip Code 95354
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ALLIED UNIVERSAL SECURITY SYSTEMS	Occupation (for Individual) SECURITY GUARD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2021

Transaction ID : A-16544

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

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

Mailing Address 130 ANGLE LANE

City MODESTO	State CA	Zip Code 95354
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ALLIED UNIVERSAL SECURITY SYSTEMS	Occupation (for Individual) SECURITY GUARD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2021

Transaction ID : A-16543

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

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

Mailing Address 130 ANGLE LANE

City MODESTO	State CA	Zip Code 95354
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ALLIED UNIVERSAL SECURITY SYSTEMS	Occupation (for Individual) SECURITY GUARD
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2021

Transaction ID : A-16542

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. BYRD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 ANGLE LANE
 City: MODESTO State: CA Zip Code: 95354
 FEC ID number of contributing federal political committee: **C**
 Name of Employer (for Individual): ALLIED UNIVERSAL SECURITY SYSTEMS Occupation (for Individual): SECURITY GUARD
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 240.30

Date of Receipt: 11 / 12 / 2021
Transaction ID : A-16541
 Amount of Each Receipt this Period: 5.00
 Memo Item CONTRIBUTION

B. BYRD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 ANGLE LANE
 City: MODESTO State: CA Zip Code: 95354
 FEC ID number of contributing federal political committee: **C**
 Name of Employer (for Individual): ALLIED UNIVERSAL SECURITY SYSTEMS Occupation (for Individual): SECURITY GUARD
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 245.30

Date of Receipt: 12 / 12 / 2021
Transaction ID : A-16540
 Amount of Each Receipt this Period: 5.00
 Memo Item CONTRIBUTION

C. BYRNE, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 SANDRA MURAIWA WAY APT 502
 City: AUSTIN State: TX Zip Code: 78703
 FEC ID number of contributing federal political committee: **C**
 Name of Employer (for Individual): WORKRISE, INC. Occupation (for Individual): SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 225.00

Date of Receipt: 11 / 15 / 2021
Transaction ID : A-16547
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 35.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. BYRNE, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 SANDRA MURANDA WAY
 APT 502
 City AUSTIN State TX Zip Code 78703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WORKRISE, INC. Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 15 / 2021
Transaction ID : A-16546
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CALLAHAN, COLBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 COOL MEADOWS DRIVE
 City LAS VEGAS State NV Zip Code 89129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETFLIX Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 11 / 2021
Transaction ID : A-16570
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. CALLAHAN, COLBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 COOL MEADOWS DRIVE
 City LAS VEGAS State NV Zip Code 89129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETFLIX Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 12 / 23 / 2021
Transaction ID : A-16569
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 525
	<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)
MISES PAC

A. CAMPBELL, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3980 N MAJOR DRIVE
 310
 City BEAUMONT State TX Zip Code 77713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USLBM Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2021
Transaction ID : A-16593
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CAMPBELL, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3980 N MAJOR DRIVE
 310
 City BEAUMONT State TX Zip Code 77713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USLBM Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2021
Transaction ID : A-16592
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CAMPO, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 NORTH SANDHILLS LANE
 City EVANS State GA Zip Code 30809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL WHOLESALE Occupation (for Individual) SALES REP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2021
Transaction ID : A-16602
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. CAMPO, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 NORTH SANDHILLS LANE

City EVANS	State GA	Zip Code 30809
---------------	-------------	-------------------

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

Name of Employer (for Individual) GENERAL WHOLESALE	Occupation (for Individual) SALES REP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2021

Transaction ID : A-16601

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 309 NORTH SANDHILLS LANE

City EVANS	State GA	Zip Code 30809
---------------	-------------	-------------------

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

Name of Employer (for Individual) GENERAL WHOLESALE	Occupation (for Individual) SALES REP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2021

Transaction ID : A-16600

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 309 NORTH SANDHILLS LANE

City EVANS	State GA	Zip Code 30809
---------------	-------------	-------------------

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

Name of Employer (for Individual) GENERAL WHOLESALE	Occupation (for Individual) SALES REP
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2021

Transaction ID : A-16599

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CAMPO, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 NORTH SANDHILLS LANE

City EVANS	State GA	Zip Code 30809
---------------	-------------	-------------------

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

Name of Employer (for Individual) GENERAL WHOLESALE	Occupation (for Individual) SALES REP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2021

Transaction ID : A-16598

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 309 NORTH SANDHILLS LANE

City EVANS	State GA	Zip Code 30809
---------------	-------------	-------------------

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

Name of Employer (for Individual) GENERAL WHOLESALE	Occupation (for Individual) SALES REP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2021

Transaction ID : A-16597

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 309 NORTH SANDHILLS LANE

City EVANS	State GA	Zip Code 30809
---------------	-------------	-------------------

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

Name of Employer (for Individual) GENERAL WHOLESALE	Occupation (for Individual) SALES REP
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2021

Transaction ID : A-16596

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CAMPO, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 NORTH SANDHILLS LANE
 City EVANS State GA Zip Code 30809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL WHOLESALE Occupation (for Individual) SALES REP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 16 / 2021
Transaction ID : A-16595
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CAMPO, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 NORTH SANDHILLS LANE
 City EVANS State GA Zip Code 30809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL WHOLESALE Occupation (for Individual) SALES REP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 16 / 2021
Transaction ID : A-16594
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CANKAR, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18109 SULLIVAN AVE
 City PORT CHARLOTTE State FL Zip Code 33954-1733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLOTTE COUNTY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.98

Date of Receipt 09 / 20 / 2021
Transaction ID : A-16618
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 60 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CANKAR, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18109 SULLIVAN AVE
 City PORT CHARLOTTE State FL Zip Code 33954-1733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLOTTE COUNTY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.98

Date of Receipt **09 / 26 / 2021**
Transaction ID : A-16612
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. CANKAR, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18109 SULLIVAN AVE
 City PORT CHARLOTTE State FL Zip Code 33954-1733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLOTTE COUNTY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.98

Date of Receipt **10 / 20 / 2021**
Transaction ID : A-16617
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. CANKAR, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18109 SULLIVAN AVE
 City PORT CHARLOTTE State FL Zip Code 33954-1733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLOTTE COUNTY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.98

Date of Receipt **10 / 26 / 2021**
Transaction ID : A-16611
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 20.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CANKAR, MATTHEW, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2021
Mailing Address 18109 SULLIVAN AVE		Transaction ID : A-16616
City PORT CHARLOTTE	State FL	Zip Code 33954-1733
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) CHARLOTTE COUNTY	Occupation (for Individual) TEACHER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.98	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CANKAR, MATTHEW, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2021
Mailing Address 18109 SULLIVAN AVE		Transaction ID : A-16610
City PORT CHARLOTTE	State FL	Zip Code 33954-1733
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) CHARLOTTE COUNTY	Occupation (for Individual) TEACHER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.98	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CANKAR, MATTHEW, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2021
Mailing Address 18109 SULLIVAN AVE		Transaction ID : A-16615
City PORT CHARLOTTE	State FL	Zip Code 33954-1733
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) CHARLOTTE COUNTY	Occupation (for Individual) TEACHER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 252.98	

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 62 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CANKAR, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18109 SULLIVAN AVE
 City PORT CHARLOTTE State FL Zip Code 33954-1733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLOTTE COUNTY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.98

Date of Receipt **12 / 26 / 2021**
Transaction ID : A-16609
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. CANTRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11421 EAST CALLE DEL VALLE
 City TUCSON State AZ Zip Code 85749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINTAGE EXOTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 03 / 2021**
Transaction ID : A-16624
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CANTRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11421 EAST CALLE DEL VALLE
 City TUCSON State AZ Zip Code 85749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINTAGE EXOTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 03 / 2021**
Transaction ID : A-16623
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CANTRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11421 EAST CALLE DEL VALLE
 City TUCSON State AZ Zip Code 85749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINTAGE EXOTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 03 / 2021
Transaction ID : A-16622
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. CANTRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11421 EAST CALLE DEL VALLE
 City TUCSON State AZ Zip Code 85749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINTAGE EXOTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 03 / 2021
Transaction ID : A-16621
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. CAPPEL, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 CHESTNUT ST
 City ARAPAHOE State NE Zip Code 68922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPPEL CHIROPRACTIC AND PERSONAL TRAIN Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 28 / 2021
Transaction ID : A-16628
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CAPPEL, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 CHESTNUT ST
 City ARAPAHOE State NE Zip Code 68922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPPEL CHIROPRACTIC AND PERSONAL TRAIN Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 28 / 2021
Transaction ID : A-16627
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CAPUANO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 974 MAPLE HILL ROAD
 City CASTLETON-ON-HUDSON State NY Zip Code 12033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNELL Occupation (for Individual) STUDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 28 / 2021
Transaction ID : A-16635
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. CAPUANO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 974 MAPLE HILL ROAD
 City CASTLETON-ON-HUDSON State NY Zip Code 12033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNELL Occupation (for Individual) STUDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00

Date of Receipt 12 / 22 / 2021
Transaction ID : A-16634
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. CAPUANO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 974 MAPLE HILL ROAD
 City CASTLETON-ON-HUDSON State NY Zip Code 12033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNELL Occupation (for Individual) STUDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **12 / 28 / 2021**
Transaction ID : A-16633
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CARPENTER, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 571 SECRETARIAT CT.
 City RENO State NV Zip Code 89521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY NEVADA Occupation (for Individual) IT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.98

Date of Receipt **07 / 08 / 2021**
Transaction ID : A-16669
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARPENTER, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 571 SECRETARIAT CT.
 City RENO State NV Zip Code 89521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY NEVADA Occupation (for Individual) IT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.98

Date of Receipt **08 / 08 / 2021**
Transaction ID : A-16668
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 66 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CARPENTER, BRAD, , ,

Mailing Address 571 SECRETARIAT CT.

City RENO	State NV	Zip Code 89521
--------------	-------------	-------------------

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

Name of Employer (for Individual) UROLOGY NEVADA	Occupation (for Individual) IT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2021

Transaction ID : A-16667

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 571 SECRETARIAT CT.

City RENO	State NV	Zip Code 89521
--------------	-------------	-------------------

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

Name of Employer (for Individual) UROLOGY NEVADA	Occupation (for Individual) IT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2021

Transaction ID : A-16666

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 571 SECRETARIAT CT.

City RENO	State NV	Zip Code 89521
--------------	-------------	-------------------

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

Name of Employer (for Individual) UROLOGY NEVADA	Occupation (for Individual) IT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
302.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2021

Transaction ID : A-16665

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CARPENTER, BRAD, , ,

Mailing Address 571 SECRETARIAT CT.

City RENO	State NV	Zip Code 89521
--------------	-------------	-------------------

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

Name of Employer (for Individual) UROLOGY NEVADA	Occupation (for Individual) IT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2021

Transaction ID : A-16664

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 1520 HAMILTON STREET
APARTMENT 528

City PHILADELPHIA	State PA	Zip Code 19130
----------------------	-------------	-------------------

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

Name of Employer (for Individual) SEI INVESTMENTS COMPANY	Occupation (for Individual) FINANCIAL SERVICES
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2021

Transaction ID : A-16690

Amount of Each Receipt this Period
26.06

Memo Item
CONTRIBUTION

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

Mailing Address 1520 HAMILTON STREET
APARTMENT 528

City PHILADELPHIA	State PA	Zip Code 19130
----------------------	-------------	-------------------

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

Name of Employer (for Individual) SEI INVESTMENTS COMPANY	Occupation (for Individual) FINANCIAL SERVICES
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
234.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2021

Transaction ID : A-16689

Amount of Each Receipt this Period
26.06

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	77.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 525
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CARUS, BRIAN, , ,			Date of Receipt MM / DD / YYYY 10 / 18 / 2021
Mailing Address 1520 HAMILTON STREET APARTMENT 528			Transaction ID : A-16688
City PHILADELPHIA	State PA	Zip Code 19130	Amount of Each Receipt this Period 26.06
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SEI INVESTMENTS COMPANY		Occupation (for Individual) FINANCIAL SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.60	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CASEY, DAVE, , ,			Date of Receipt MM / DD / YYYY 12 / 03 / 2021
Mailing Address 144 EAST 3RD STREET			Transaction ID : A-16695
City NEW CASTLE	State DE	Zip Code 19720	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF		Occupation (for Individual) RESTAURANTEUR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CAYLOR, DYLAN, , ,			Date of Receipt MM / DD / YYYY 08 / 28 / 2021
Mailing Address 4713 LEISURE DRIVE			Transaction ID : A-16740
City MIDLAND	State TX	Zip Code 79703	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) BIRCH RESOURCES		Occupation (for Individual) LEASE OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....	301.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CAYLOR, DYLAN, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 28 / 2021
Mailing Address 4713 LEISURE DRIVE			Transaction ID : A-16739
City MIDLAND	State TX	Zip Code 79703	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) BIRCH RESOURCES		Occupation (for Individual) LEASE OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CAYLOR, DYLAN, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2021
Mailing Address 4713 LEISURE DRIVE			Transaction ID : A-16738
City MIDLAND	State TX	Zip Code 79703	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) BIRCH RESOURCES		Occupation (for Individual) LEASE OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CAYLOR, DYLAN, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2021
Mailing Address 4713 LEISURE DRIVE			Transaction ID : A-16737
City MIDLAND	State TX	Zip Code 79703	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) BIRCH RESOURCES		Occupation (for Individual) LEASE OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 290.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 70 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CAYLOR, DYLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 LEISURE DRIVE
 City MIDLAND State TX Zip Code 79703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIRCH RESOURCES Occupation (for Individual) LEASE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **12 / 28 / 2021**
Transaction ID : A-16736
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. CHADDERDON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30005 MALVERN STREET
 City WESTLAND State MI Zip Code 48185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HELLA ELECTRONICS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 406.00

Date of Receipt **07 / 20 / 2021**
Transaction ID : A-16762
 Amount of Each Receipt this Period 40.00
 Memo Item
 CONTRIBUTION

C. CHADDERDON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30005 MALVERN STREET
 City WESTLAND State MI Zip Code 48185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HELLA ELECTRONICS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.00

Date of Receipt **08 / 20 / 2021**
Transaction ID : A-16761
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CHADDERDON, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30005 MALVERN STREET

City WESTLAND	State MI	Zip Code 48185
------------------	-------------	-------------------

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

Name of Employer (for Individual) HELLA ELECTRONICS CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
506.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2021

Transaction ID : A-16760

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 30005 MALVERN STREET

City WESTLAND	State MI	Zip Code 48185
------------------	-------------	-------------------

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

Name of Employer (for Individual) HELLA ELECTRONICS CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
556.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

Transaction ID : A-16759

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 30005 MALVERN STREET

City WESTLAND	State MI	Zip Code 48185
------------------	-------------	-------------------

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

Name of Employer (for Individual) HELLA ELECTRONICS CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
606.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2021

Transaction ID : A-16758

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CHADDERDON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30005 MALVERN STREET
 City WESTLAND State MI Zip Code 48185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HELLA ELECTRONICS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 656.00

Date of Receipt **12 / 20 / 2021**
Transaction ID : A-16757
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHAMBERS, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5109 82ND STREET 7 1159
 City LUBBOCK State TX Zip Code 79424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUREAU VERITAS Occupation (for Individual) TURBINE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 22 / 2021**
Transaction ID : A-16766
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHAMBERS, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5109 82ND STREET 7 1159
 City LUBBOCK State TX Zip Code 79424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUREAU VERITAS Occupation (for Individual) TURBINE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 22 / 2021**
Transaction ID : A-16765
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 73 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CHAMBERS, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5109 82ND STREET
 7 1159
 City LUBBOCK State TX Zip Code 79424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUREAU VERITAS Occupation (for Individual) TURBINE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2021
Transaction ID : A-16764
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. CHAMBERS, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5109 82ND STREET
 7 1159
 City LUBBOCK State TX Zip Code 79424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUREAU VERITAS Occupation (for Individual) TURBINE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2021
Transaction ID : A-16763
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. CIMIJOTTI, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 EL CIELO LINDO COURT
 City HARLINGEN State TX Zip Code 78552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINDE Occupation (for Individual) PIPELINE INTEGRITY TECHNICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2021
Transaction ID : A-16807
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CIMIJOTTI, RAY, , ,

Mailing Address 1901 EL CIELO LINDO COURT

City HARLINGEN	State TX	Zip Code 78552
-------------------	-------------	-------------------

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

Name of Employer (for Individual) LINDE	Occupation (for Individual) PIPELINE INTEGRITY TECHNICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2021

Transaction ID : A-16806

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 1901 EL CIELO LINDO COURT

City HARLINGEN	State TX	Zip Code 78552
-------------------	-------------	-------------------

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

Name of Employer (for Individual) LINDE	Occupation (for Individual) PIPELINE INTEGRITY TECHNICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : A-16805

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 1901 EL CIELO LINDO COURT

City HARLINGEN	State TX	Zip Code 78552
-------------------	-------------	-------------------

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

Name of Employer (for Individual) LINDE	Occupation (for Individual) PIPELINE INTEGRITY TECHNICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2021

Transaction ID : A-16804

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CIMIJOTTI, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 EL CIELO LINDO COURT
 City HARLINGEN State TX Zip Code 78552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINDE Occupation (for Individual) PIPELINE INTEGRITY TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 09 / 2021
Transaction ID : A-16803
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CIMIJOTTI, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 EL CIELO LINDO COURT
 City HARLINGEN State TX Zip Code 78552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINDE Occupation (for Individual) PIPELINE INTEGRITY TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 09 / 2021
Transaction ID : A-16802
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CLARK, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3734 VIA TORTOLA
 City RIVERSIDE State CA Zip Code 92503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANE TECHNOLOGIES Occupation (for Individual) SERVICE ACCOUNT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 357.88

Date of Receipt 07 / 26 / 2021
Transaction ID : A-16859
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 76 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CLARK, JOSHUA, , ,

Mailing Address 3734 VIA TORTOLA

City RIVERSIDE	State CA	Zip Code 92503
-------------------	-------------	-------------------

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

Name of Employer (for Individual) TRANE TECHNOLOGIES	Occupation (for Individual) SERVICE ACCOUNT MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
457.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2021

Transaction ID : A-16858

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 3734 VIA TORTOLA

City RIVERSIDE	State CA	Zip Code 92503
-------------------	-------------	-------------------

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

Name of Employer (for Individual) TRANE TECHNOLOGIES	Occupation (for Individual) SERVICE ACCOUNT MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
557.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2021

Transaction ID : A-16857

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 3734 VIA TORTOLA

City RIVERSIDE	State CA	Zip Code 92503
-------------------	-------------	-------------------

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

Name of Employer (for Individual) TRANE TECHNOLOGIES	Occupation (for Individual) SERVICE ACCOUNT MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
657.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2021

Transaction ID : A-16856

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CLARK, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17748 96TH AVE N
 City MAPLE GROVE State MN Zip Code 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) SOLDIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2021
Transaction ID : A-16829
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. CLARK, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17748 96TH AVE N
 City MAPLE GROVE State MN Zip Code 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) SOLDIER
 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
 10 / 27 / 2021
Transaction ID : A-16828
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. CLARK, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17748 96TH AVE N
 City MAPLE GROVE State MN Zip Code 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) SOLDIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2021
Transaction ID : A-16827
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CLARK, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17748 96TH AVE N
 City MAPLE GROVE State MN Zip Code 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) SOLDIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2021
Transaction ID : A-16826
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. CLARK, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2452 SILVER BLOSSOM LANE
 City HENDERSON State NV Zip Code 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESTORATIONS SERVICES LLC Occupation (for Individual) 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
 07 / 15 / 2021
Transaction ID : A-16855
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. CLARK, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2452 SILVER BLOSSOM LANE
 City HENDERSON State NV Zip Code 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESTORATIONS SERVICES LLC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2021
Transaction ID : A-16854
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 79 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CLARK, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2452 SILVER BLOSSOM LANE

City HENDERSON	State NV	Zip Code 89052
-------------------	-------------	-------------------

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

Name of Employer (for Individual) RESTORATIONS SERVICES LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2021

Transaction ID : A-16853

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 2452 SILVER BLOSSOM LANE

City HENDERSON	State NV	Zip Code 89052
-------------------	-------------	-------------------

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

Name of Employer (for Individual) RESTORATIONS SERVICES LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2021

Transaction ID : A-16852

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 2452 SILVER BLOSSOM LANE

City HENDERSON	State NV	Zip Code 89052
-------------------	-------------	-------------------

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

Name of Employer (for Individual) RESTORATIONS SERVICES LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2021

Transaction ID : A-16851

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CLARK, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2452 SILVER BLOSSOM LANE

City HENDERSON	State NV	Zip Code 89052
-------------------	-------------	-------------------

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

Name of Employer (for Individual) RESTORATIONS SERVICES LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2021

Transaction ID : A-16850

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 281 WEST WALNUT STREET

City KANKAKEE	State IL	Zip Code 60901
------------------	-------------	-------------------

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

Name of Employer (for Individual) KANKAKEE COUNTY	Occupation (for Individual) 13TH DISTRICT REPRESENTATIVE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2021

Transaction ID : A-16890

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

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

Mailing Address 281 WEST WALNUT STREET

City KANKAKEE	State IL	Zip Code 60901
------------------	-------------	-------------------

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

Name of Employer (for Individual) KANKAKEE COUNTY	Occupation (for Individual) 13TH DISTRICT REPRESENTATIVE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2021

Transaction ID : A-16889

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 81 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. COMBS, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 931 FLETCHER AVENUE
 212
 City INDIANAPOLIS State IN Zip Code 46203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELANCO Occupation (for Individual) SR. ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 04 / 2021
Transaction ID : A-16918
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COMBS, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 931 FLETCHER AVENUE
 212
 City INDIANAPOLIS State IN Zip Code 46203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELANCO Occupation (for Individual) SR. ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 04 / 2021
Transaction ID : A-16917
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COMBS, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 931 FLETCHER AVENUE
 212
 City INDIANAPOLIS State IN Zip Code 46203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELANCO Occupation (for Individual) SR. ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 04 / 2021
Transaction ID : A-16916
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 82 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COMBS, ANTHONY, , ,

Mailing Address 931 FLETCHER AVENUE
212

City INDIANAPOLIS State IN Zip Code 46203

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

Name of Employer (for Individual) ELANCO Occupation (for Individual) SR. ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 04 / 2021
Transaction ID : A-16915

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 931 FLETCHER AVENUE
212

City INDIANAPOLIS State IN Zip Code 46203

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

Name of Employer (for Individual) ELANCO Occupation (for Individual) SR. ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
11 / 04 / 2021
Transaction ID : A-16914

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 931 FLETCHER AVENUE
212

City INDIANAPOLIS State IN Zip Code 46203

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

Name of Employer (for Individual) ELANCO Occupation (for Individual) SR. ANALYST

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
12 / 04 / 2021
Transaction ID : A-16913

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 83 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. COOK, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21457 EAST SHARP STREET

City ROCK HALL	State MD	Zip Code 21661
-------------------	-------------	-------------------

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

Name of Employer (for Individual) RAUCH INC	Occupation (for Individual) ENGINEERING PROJECT FACILITATC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2021

Transaction ID : A-16936

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 21457 EAST SHARP STREET

City ROCK HALL	State MD	Zip Code 21661
-------------------	-------------	-------------------

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

Name of Employer (for Individual) RAUCH INC	Occupation (for Individual) ENGINEERING PROJECT FACILITATC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2021

Transaction ID : A-16935

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 21457 EAST SHARP STREET

City ROCK HALL	State MD	Zip Code 21661
-------------------	-------------	-------------------

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

Name of Employer (for Individual) RAUCH INC	Occupation (for Individual) ENGINEERING PROJECT FACILITATC
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2021

Transaction ID : A-16934

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. COOK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21457 EAST SHARP STREET
 City ROCK HALL State MD Zip Code 21661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAUCH INC Occupation (for Individual) ENGINEERING PROJECT FACILITAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.40

Date of Receipt **10 / 28 / 2021**
Transaction ID : A-16933
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COOK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21457 EAST SHARP STREET
 City ROCK HALL State MD Zip Code 21661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAUCH INC Occupation (for Individual) ENGINEERING PROJECT FACILITAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.40

Date of Receipt **11 / 28 / 2021**
Transaction ID : A-16932
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COOK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21457 EAST SHARP STREET
 City ROCK HALL State MD Zip Code 21661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAUCH INC Occupation (for Individual) ENGINEERING PROJECT FACILITAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.40

Date of Receipt **12 / 28 / 2021**
Transaction ID : A-16931
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CORBETT, SEAN, , ,

Mailing Address **2386 MILLBROOK RD**

City KENNERDELL	State PA	Zip Code 16374
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) GEORGE JUNIOR REPUBLIC	Occupation (for Individual) SYSTEMS ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.74

Date of Receipt
07 / 11 / 2021

Transaction ID : A-16956

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address **2386 MILLBROOK RD**

City KENNERDELL	State PA	Zip Code 16374
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) GEORGE JUNIOR REPUBLIC	Occupation (for Individual) SYSTEMS ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.74

Date of Receipt
08 / 11 / 2021

Transaction ID : A-16955

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address **2386 MILLBROOK RD**

City KENNERDELL	State PA	Zip Code 16374
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) GEORGE JUNIOR REPUBLIC	Occupation (for Individual) SYSTEMS ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
257.74

Date of Receipt
09 / 11 / 2021

Transaction ID : A-16954

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CORBETT, SEAN, , ,

Mailing Address **2386 MILLBROOK RD**

City KENNERDELL	State PA	Zip Code 16374
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) GEORGE JUNIOR REPUBLIC	Occupation (for Individual) SYSTEMS ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **282.74**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2021

Transaction ID : A-16953

Amount of Each Receipt this Period

25.00

 Memo Item
CONTRIBUTION

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

Mailing Address **2386 MILLBROOK RD**

City KENNERDELL	State PA	Zip Code 16374
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) GEORGE JUNIOR REPUBLIC	Occupation (for Individual) SYSTEMS ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.74**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2021

Transaction ID : A-16952

Amount of Each Receipt this Period

25.00

 Memo Item
CONTRIBUTION

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

Mailing Address **2386 MILLBROOK RD**

City KENNERDELL	State PA	Zip Code 16374
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) GEORGE JUNIOR REPUBLIC	Occupation (for Individual) SYSTEMS ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **332.74**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2021

Transaction ID : A-16951

Amount of Each Receipt this Period

25.00

 Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 87 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. COXON, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 ATHOL AVENUE
 207
 City OAKLAND State CA Zip Code 94606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE RIOT PROFESSOR Occupation (for Individual) DRUMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2021
Transaction ID : A-17061
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. COXON, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 ATHOL AVENUE
 207
 City OAKLAND State CA Zip Code 94606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE RIOT PROFESSOR Occupation (for Individual) DRUMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2021
Transaction ID : A-17060
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. COXON, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 ATHOL AVENUE
 207
 City OAKLAND State CA Zip Code 94606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE RIOT PROFESSOR Occupation (for Individual) DRUMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2021
Transaction ID : A-17059
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 88 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. COYKENDALL, MATT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 E GLENDALE AVE
 City ORANGE State CA Zip Code 92865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURO FINANCIAL TECHNOLOGIES Occupation (for Individual) IT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 08 / 2021
Transaction ID : A-17068
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. COYKENDALL, MATT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 E GLENDALE AVE
 City ORANGE State CA Zip Code 92865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURO FINANCIAL TECHNOLOGIES Occupation (for Individual) IT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 08 / 2021
Transaction ID : A-17067
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. COYKENDALL, MATT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 E GLENDALE AVE
 City ORANGE State CA Zip Code 92865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURO FINANCIAL TECHNOLOGIES Occupation (for Individual) IT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 08 / 2021
Transaction ID : A-17066
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 OF 525
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. COYKENDALL, MATT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 E GLENDALE AVE
 City ORANGE State CA Zip Code 92865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURO FINANCIAL TECHNOLOGIES Occupation (for Individual) IT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 08 / 2021**
Transaction ID : A-17065
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. CRAWFORD, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 LIDO ROAD
 City WINTER SPRINGS State FL Zip Code 32708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMP Occupation (for Individual) HANDYMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt **07 / 20 / 2021**
Transaction ID : A-17082
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. CRAWFORD, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 LIDO ROAD
 City WINTER SPRINGS State FL Zip Code 32708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMP Occupation (for Individual) HANDYMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt **08 / 20 / 2021**
Transaction ID : A-17081
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CRAWFORD, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 LIDO ROAD
 City WINTER SPRINGS State FL Zip Code 32708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMP Occupation (for Individual) HANDYMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2021
Transaction ID : A-17080
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. CRAWFORD, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 LIDO ROAD
 City WINTER SPRINGS State FL Zip Code 32708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMP Occupation (for Individual) HANDYMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2021
Transaction ID : A-17079
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. CRAWFORD, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 LIDO ROAD
 City WINTER SPRINGS State FL Zip Code 32708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMP Occupation (for Individual) HANDYMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2021
Transaction ID : A-17078
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. CRAWFORD, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 LIDO ROAD
 City WINTER SPRINGS State FL Zip Code 32708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMP Occupation (for Individual) HANDYMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt **12 / 20 / 2021**
Transaction ID : A-17077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CUMMINGS, NATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 BRUSH STREET 2415
 City DETROIT State MI Zip Code 48226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPMG Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.42

Date of Receipt **07 / 22 / 2021**
Transaction ID : A-17123
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

C. CUMMINGS, NATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 BRUSH STREET 2415
 City DETROIT State MI Zip Code 48226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPMG Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.42

Date of Receipt **07 / 22 / 2021**
Transaction ID : A-17124
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 151.06
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CUMMINGS, NATE, , ,			Date of Receipt
Mailing Address 555 BRUSH STREET 2415			<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2021"/>
City DETROIT	State MI	Zip Code 48226	Transaction ID : A-17121
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="26.06"/>
Name of Employer (for Individual) KPMG		Occupation (for Individual) CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="408.48"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CUMMINGS, NATE, , ,			Date of Receipt
Mailing Address 555 BRUSH STREET 2415			<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2021"/>
City DETROIT	State MI	Zip Code 48226	Transaction ID : A-17122
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) KPMG		Occupation (for Individual) CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="408.48"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CUMMINGS, NATE, , ,			Date of Receipt
Mailing Address 555 BRUSH STREET 2415			<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2021"/>
City DETROIT	State MI	Zip Code 48226	Transaction ID : A-17119
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="26.06"/>
Name of Employer (for Individual) KPMG		Occupation (for Individual) CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="459.54"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="77.12"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 93 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CUMMINGS, NATE, , ,

Mailing Address 555 BRUSH STREET
2415

City State Zip Code
DETROIT MI 48226

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
459.54

Date of Receipt
MM / DD / YYYY
09 / 22 / 2021

Transaction ID : **A-17120**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 555 BRUSH STREET
2415

City State Zip Code
DETROIT MI 48226

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
510.60

Date of Receipt
MM / DD / YYYY
10 / 22 / 2021

Transaction ID : **A-17117**

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

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

Mailing Address 555 BRUSH STREET
2415

City State Zip Code
DETROIT MI 48226

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
510.60

Date of Receipt
MM / DD / YYYY
10 / 22 / 2021

Transaction ID : **A-17118**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. CUMMINGS, NATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 BRUSH STREET
 2415
 City DETROIT State MI Zip Code 48226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPMG Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 561.66

Date of Receipt 11 / 22 / 2021
Transaction ID : A-17115
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

B. CUMMINGS, NATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 BRUSH STREET
 2415
 City DETROIT State MI Zip Code 48226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPMG Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 561.66

Date of Receipt 11 / 22 / 2021
Transaction ID : A-17116
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CUMMINGS, NATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 BRUSH STREET
 2415
 City DETROIT State MI Zip Code 48226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPMG Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 612.72

Date of Receipt 12 / 22 / 2021
Transaction ID : A-17113
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	77.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CUMMINGS, NATE, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2021
Mailing Address 555 BRUSH STREET 2415			Transaction ID : A-17114
City DETROIT	State MI	Zip Code 48226	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KPMG		Occupation (for Individual) CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 612.72		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. D, DAVID, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 30 / 2021
Mailing Address 100 ANDOVER PARK WEST SUITE 150 PM			Transaction ID : A-17151
City TUKWILA	State WA	Zip Code 98188	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. D, DAVID, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 30 / 2021
Mailing Address 100 ANDOVER PARK WEST SUITE 150 PM			Transaction ID : A-17150
City TUKWILA	State WA	Zip Code 98188	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 96 OF 525
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISES PAC

A. D, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 ANDOVER PARK WEST SUITE 150 PM

City TUKWILA	State WA	Zip Code 98188
-----------------	-------------	-------------------

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 ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

Transaction ID : A-17149

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 100 ANDOVER PARK WEST SUITE 150 PM

City TUKWILA	State WA	Zip Code 98188
-----------------	-------------	-------------------

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 ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2021

Transaction ID : A-17148

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 100 ANDOVER PARK WEST SUITE 150 PM

City TUKWILA	State WA	Zip Code 98188
-----------------	-------------	-------------------

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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2021

Transaction ID : A-17147

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. D, DAVID, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2021
Mailing Address 100 ANDOVER PARK WEST SUITE 150 PM			Transaction ID : A-17146
City TUKWILA	State WA	Zip Code 98188	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DAHL, ANDREW, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2021
Mailing Address 308 COLLEGE STREET			Transaction ID : A-17156
City VILLA GROVE	State IL	Zip Code 61956	Amount of Each Receipt this Period 20.21
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KANOPI STUDIOS		Occupation (for Individual) PROJECT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.10	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DAHL, ANDREW, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2021
Mailing Address 308 COLLEGE STREET			Transaction ID : A-17155
City VILLA GROVE	State IL	Zip Code 61956	Amount of Each Receipt this Period 20.21
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KANOPI STUDIOS		Occupation (for Individual) PROJECT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 222.31	

SUBTOTAL of Receipts This Page (optional).....	140.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DAHL, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 COLLEGE STREET

City VILLA GROVE	State IL	Zip Code 61956
---------------------	-------------	-------------------

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

Name of Employer (for Individual) KANOPI STUDIOS	Occupation (for Individual) PROJECT MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2021

Transaction ID : A-17154

Amount of Each Receipt this Period
20.21

Memo Item CONTRIBUTION

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

Mailing Address 1404 CENTER CHURCH RD

City SANFORD	State NC	Zip Code 27330-7513
-----------------	-------------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2021

Transaction ID : A-17202

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 1404 CENTER CHURCH RD

City SANFORD	State NC	Zip Code 27330-7513
-----------------	-------------	------------------------

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 M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2021

Transaction ID : A-17201

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DAVIS, WHITNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 1ST ST
 UNIT 408
 City KIRKLAND State WA Zip Code 98033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONOLITHIC POWER SYSTEMS Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.80

Date of Receipt **07 / 24 / 2021**
Transaction ID : A-17252
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DAVIS, WHITNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 1ST ST
 UNIT 408
 City KIRKLAND State WA Zip Code 98033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONOLITHIC POWER SYSTEMS Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 454.80

Date of Receipt **08 / 24 / 2021**
Transaction ID : A-17251
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DAVIS, WHITNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 1ST ST
 UNIT 408
 City KIRKLAND State WA Zip Code 98033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONOLITHIC POWER SYSTEMS Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.80

Date of Receipt **09 / 24 / 2021**
Transaction ID : A-17250
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DAVIS, WHITNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 1ST ST
 UNIT 408
 City KIRKLAND State WA Zip Code 98033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONOLITHIC POWER SYSTEMS Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 554.80

Date of Receipt 10 / 25 / 2021
Transaction ID : A-17249
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DAVIS, WHITNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 1ST ST
 UNIT 408
 City KIRKLAND State WA Zip Code 98033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONOLITHIC POWER SYSTEMS Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 604.80

Date of Receipt 11 / 24 / 2021
Transaction ID : A-17248
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DAVIS, WHITNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 1ST ST
 UNIT 408
 City KIRKLAND State WA Zip Code 98033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONOLITHIC POWER SYSTEMS Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 654.80

Date of Receipt 12 / 24 / 2021
Transaction ID : A-17247
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 101 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DECKER, STEPHEN, , ,

Mailing Address 1313 GLENVILLE DRIVE

City ALLEN State TX Zip Code 75013

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

Name of Employer (for Individual) VECTOR MARKETING Occupation (for Individual) SALES PROFESSIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **233.74**

Date of Receipt **11 / 26 / 2021**

Transaction ID : A-17279

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

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

Mailing Address 1313 GLENVILLE DRIVE

City ALLEN State TX Zip Code 75013

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

Name of Employer (for Individual) VECTOR MARKETING Occupation (for Individual) SALES PROFESSIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **283.74**

Date of Receipt **12 / 26 / 2021**

Transaction ID : A-17278

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

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

Mailing Address 9 TAWNY TERRACE
STREET ADDRESS 2

City WILTON State NY Zip Code 12831

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ **223.49**

Date of Receipt **08 / 28 / 2021**

Transaction ID : A-17287

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **125.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DECUBELLIS, ANTHONY, , ,		Date of Receipt
Mailing Address 9 TAWNY TERRACE STREET ADDRESS 2		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2021"/>
City WILTON	State NY	Zip Code 12831
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17286
Name of Employer (for Individual) HONEYWELL		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) MANAGER		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="248.49"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DECUBELLIS, ANTHONY, , ,		Date of Receipt
Mailing Address 9 TAWNY TERRACE STREET ADDRESS 2		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2021"/>
City WILTON	State NY	Zip Code 12831
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17285
Name of Employer (for Individual) HONEYWELL		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) MANAGER		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="273.49"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DECUBELLIS, ANTHONY, , ,		Date of Receipt
Mailing Address 9 TAWNY TERRACE STREET ADDRESS 2		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2021"/>
City WILTON	State NY	Zip Code 12831
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17284
Name of Employer (for Individual) HONEYWELL		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) MANAGER		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="298.49"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DECUBELLIS, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 TAWNY TERRACE
STREET ADDRESS 2

City WILTON State NY Zip Code 12831

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.49

Date of Receipt **12 / 28 / 2021**

Transaction ID : A-17283

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

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

Mailing Address 20 PATRIOTS ROAD

City STRATHAM State NH Zip Code 03885

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

Name of Employer (for Individual) LOUD CANVAS MEDIA Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 784.80

Date of Receipt **07 / 08 / 2021**

Transaction ID : A-17324

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

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

Mailing Address 20 PATRIOTS ROAD

City STRATHAM State NH Zip Code 03885

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

Name of Employer (for Individual) LOUD CANVAS MEDIA Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 884.80

Date of Receipt **08 / 08 / 2021**

Transaction ID : A-17323

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 525
	<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. DEMPSEY, SEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 PATRIOTS ROAD

City STRATHAM	State NH	Zip Code 03885
------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUD CANVAS MEDIA	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
984.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2021

Transaction ID : A-17322

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 20 PATRIOTS ROAD

City STRATHAM	State NH	Zip Code 03885
------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUD CANVAS MEDIA	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1084.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2021

Transaction ID : A-17321

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 20 PATRIOTS ROAD

City STRATHAM	State NH	Zip Code 03885
------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUD CANVAS MEDIA	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1184.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2021

Transaction ID : A-17320

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 105 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DEVENNEY, RYAN, , ,

Mailing Address **234 AMIR CIRCLE**

City MATTHEWS	State NC	Zip Code 28105
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) FREELANCE	Occupation (for Individual) MUSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 08 / 2021

Transaction ID : A-17355

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address **234 AMIR CIRCLE**

City MATTHEWS	State NC	Zip Code 28105
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) FREELANCE	Occupation (for Individual) MUSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 08 / 2021

Transaction ID : A-17354

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address **234 AMIR CIRCLE**

City MATTHEWS	State NC	Zip Code 28105
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) FREELANCE	Occupation (for Individual) MUSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
12 / 08 / 2021

Transaction ID : A-17353

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DIBIASIO, JOSEPH, , ,

Mailing Address 8239 SOUTH KELLERMAN CIRCLE

City AURORA	State CO	Zip Code 80016
----------------	-------------	-------------------

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

Name of Employer (for Individual) RAMPART TECHNOLOGIES CORPORATION	Occupation (for Individual) IT/CYBER ENGINEERING AND OPER.
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
206.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2021

Transaction ID : A-17361

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 8239 SOUTH KELLERMAN CIRCLE

City AURORA	State CO	Zip Code 80016
----------------	-------------	-------------------

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

Name of Employer (for Individual) RAMPART TECHNOLOGIES CORPORATION	Occupation (for Individual) IT/CYBER ENGINEERING AND OPER.
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2021

Transaction ID : A-17360

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

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

Mailing Address 8239 SOUTH KELLERMAN CIRCLE

City AURORA	State CO	Zip Code 80016
----------------	-------------	-------------------

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

Name of Employer (for Individual) RAMPART TECHNOLOGIES CORPORATION	Occupation (for Individual) IT/CYBER ENGINEERING AND OPER.
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
241.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2021

Transaction ID : A-17359

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. 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
 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 ▼ 350.00

Date of Receipt **07 / 28 / 2021**
Transaction ID : A-17390
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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
 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 ▼ 375.00

Date of Receipt **08 / 01 / 2021**
Transaction ID : A-17389
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. 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
 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 ▼ 400.00

Date of Receipt **09 / 01 / 2021**
Transaction ID : A-17388
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 108 OF 525
<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. 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
------------------	-------------	-------------------

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 ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2021

Transaction ID : A-17387

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2021

Transaction ID : A-17386

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. 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
------------------	-------------	-------------------

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 ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2021

Transaction ID : A-17385

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DINGER, CASEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5462 ACCESS ROAD
City RIVERSIDE State OH Zip Code 45431
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) DOD Occupation (for Individual) MILITARY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 13 / 2021
Transaction ID : A-17393
Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. DINGER, CASEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5462 ACCESS ROAD
City RIVERSIDE State OH Zip Code 45431
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) DOD Occupation (for Individual) MILITARY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 13 / 2021
Transaction ID : A-17392
Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. DINGER, CASEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5462 ACCESS ROAD
City RIVERSIDE State OH Zip Code 45431
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) DOD Occupation (for Individual) MILITARY
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 13 / 2021
Transaction ID : A-17391
Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 110 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DINOVO, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5488 BURNT KNOB ROAD
 City MURFREESBORO State TN Zip Code 37129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SECURITY Occupation (for Individual) SECURITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.10

Date of Receipt 08 / 11 / 2021
Transaction ID : A-17398
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DINOVO, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5488 BURNT KNOB ROAD
 City MURFREESBORO State TN Zip Code 37129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SECURITY Occupation (for Individual) SECURITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 321.10

Date of Receipt 09 / 11 / 2021
Transaction ID : A-17397
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DOWDEN, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5021 WEST STONEHAVEN LANE
 City NEW PALESTINE State IN Zip Code 46163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELI LILLY AND COMPANY Occupation (for Individual) BIO SYNTHETIC FERMENTATION MA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.40

Date of Receipt 07 / 28 / 2021
Transaction ID : A-17445
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 111 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DOWDEN, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5021 WEST STONEHAVEN LANE
 City NEW PALESTINE State IN Zip Code 46163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELI LILLY AND COMPANY Occupation (for Individual) BIO SYNTHETIC FERMENTATION MA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt 08 / 28 / 2021
Transaction ID : A-17444
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DOWDEN, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5021 WEST STONEHAVEN LANE
 City NEW PALESTINE State IN Zip Code 46163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELI LILLY AND COMPANY Occupation (for Individual) BIO SYNTHETIC FERMENTATION MA/
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.40

Date of Receipt 09 / 28 / 2021
Transaction ID : A-17443
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DOWDEN, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5021 WEST STONEHAVEN LANE
 City NEW PALESTINE State IN Zip Code 46163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELI LILLY AND COMPANY Occupation (for Individual) BIO SYNTHETIC FERMENTATION MA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.40

Date of Receipt 10 / 28 / 2021
Transaction ID : A-17442
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DOWDEN, AARON, , ,		Date of Receipt
Mailing Address 5021 WEST STONEHAVEN LANE		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2021"/>
City NEW PALESTINE	State IN	Zip Code 46163
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17441
Name of Employer (for Individual) ELI LILLY AND COMPANY		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) BIO SYNTHETIC FERMENTATION MA		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="302.40"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DOWDEN, AARON, , ,		Date of Receipt
Mailing Address 5021 WEST STONEHAVEN LANE		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2021"/>
City NEW PALESTINE	State IN	Zip Code 46163
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17440
Name of Employer (for Individual) ELI LILLY AND COMPANY		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) BIO SYNTHETIC FERMENTATION M/		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="327.40"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DRUMMOND, SHERRI, , ,		Date of Receipt
Mailing Address 17525 TROYER ROAD		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2021"/>
City WHITE HALL	State MD	Zip Code 21161
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17478
Name of Employer (for Individual) RK&K		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) ADMIN ASST		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 113 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DRUMMOND, SHERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17525 TROYER ROAD
 City WHITE HALL State MD Zip Code 21161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RK&K ADMIN ASST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2021
Transaction ID : A-17477
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. DRUMMOND, SHERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17525 TROYER ROAD
 City WHITE HALL State MD Zip Code 21161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RK&K ADMIN ASST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2021
Transaction ID : A-17476
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. DRUMMOND, SHERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17525 TROYER ROAD
 City WHITE HALL State MD Zip Code 21161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RK&K ADMIN ASST
 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
 12 / 23 / 2021
Transaction ID : A-17475
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. DUENSING, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 S GRAHAM CREEK ROAD
 City COVINGTON State IN Zip Code 47932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYEED Occupation (for Individual) CATERER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 22 / 2021**
Transaction ID : A-17495
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. DUENSING, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 S GRAHAM CREEK ROAD
 City COVINGTON State IN Zip Code 47932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYEED Occupation (for Individual) CATERER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 22 / 2021**
Transaction ID : A-17494
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. DUENSING, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 S GRAHAM CREEK ROAD
 City COVINGTON State IN Zip Code 47932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYEED Occupation (for Individual) CATERER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **12 / 22 / 2021**
Transaction ID : A-17493
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ELLIOT, A., , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2021		
Mailing Address 10204 ORKINEY DRIVE			Transaction ID : A-23219		
City LAS VEGAS	State NV	Zip Code 89144	Amount of Each Receipt this Period 1300.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1800.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ELLIOT, A., , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2021		
Mailing Address 10204 ORKINEY DRIVE			Transaction ID : A-23220		
City LAS VEGAS	State NV	Zip Code 89144	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1800.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ELPERS, ANDREW, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2021		
Mailing Address 10100 WINERY ROAD			Transaction ID : A-17590		
City WADESVILLE	State IN	Zip Code 47638	Amount of Each Receipt this Period 26.06		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) COUNTRYMARK REFINING AND LOGISTICS, LL		Occupation (for Individual) ELECTRICAL ENGINEER	CONTRIBUTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 208.48			

SUBTOTAL of Receipts This Page (optional).....	1826.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ELPERS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 WINERY ROAD
 City WADESVILLE State IN Zip Code 47638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTRYMARK REFINING AND LOGISTICS, LL Occupation (for Individual) ELECTRICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.54

Date of Receipt 09 / 22 / 2021
Transaction ID : A-17589
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

B. ELPERS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 WINERY ROAD
 City WADESVILLE State IN Zip Code 47638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTRYMARK REFINING AND LOGISTICS, LL Occupation (for Individual) ELECTRICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.60

Date of Receipt 10 / 22 / 2021
Transaction ID : A-17588
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

C. EVANS, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BRIARWOOD DR.
 City DANVERS State IL Zip Code 61732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT LABS Occupation (for Individual) AUTOMATION TECHNICAL LEAD
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 01 / 2021
Transaction ID : A-17623
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 102.12
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 117 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. EVANS, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BRIARWOOD DR.
 City DANVERS State IL Zip Code 61732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT LABS Occupation (for Individual) AUTOMATION TECHNICAL LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2021
Transaction ID : A-17622
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EVANS, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BRIARWOOD DR.
 City DANVERS State IL Zip Code 61732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT LABS Occupation (for Individual) AUTOMATION TECHNICAL LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 01 / 2021
Transaction ID : A-17621
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EVANS, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BRIARWOOD DR.
 City DANVERS State IL Zip Code 61732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT LABS Occupation (for Individual) AUTOMATION TECHNICAL LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2021
Transaction ID : A-17620
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. EVANS, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BRIARWOOD DR.
 City DANVERS State IL Zip Code 61732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT LABS Occupation (for Individual) AUTOMATION TECHNICAL LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 15 / 2021
Transaction ID : A-17619
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. EVANS, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BRIARWOOD DR.
 City DANVERS State IL Zip Code 61732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT LABS Occupation (for Individual) AUTOMATION TECHNICAL LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 15 / 2021
Transaction ID : A-17618
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. FARBER, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 HEMPSTEAD ROAD
 240 HEMPSTEAD RD
 City RIDGEWOOD State NJ Zip Code 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2021
Transaction ID : A-17640
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. FARBER, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 HEMPSTEAD ROAD
 240 HEMPSTEAD RD
 City RIDGEWOOD State NJ Zip Code 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 15 / 2021
Transaction ID : A-17639
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. FARBER, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 HEMPSTEAD ROAD
 240 HEMPSTEAD RD
 City RIDGEWOOD State NJ Zip Code 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 15 / 2021
Transaction ID : A-17638
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. FARIAS, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 WEST AVENUE
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPGEMINI Occupation (for Individual) COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 06 / 2021
Transaction ID : A-17649
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. FARIAS, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 WEST AVENUE
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPGEMINI Occupation (for Individual) COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2021
Transaction ID : A-17648
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FARIAS, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 WEST AVENUE
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPGEMINI Occupation (for Individual) COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2021
Transaction ID : A-17647
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FARIAS, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 WEST AVENUE
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPGEMINI Occupation (for Individual) COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 06 / 2021
Transaction ID : A-17646
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 121 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FARIAS, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 WEST AVENUE
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPGEMINI Occupation (for Individual) COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 06 / 2021
Transaction ID : A-17645
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FARIAS, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 WEST AVENUE
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPGEMINI Occupation (for Individual) COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 06 / 2021
Transaction ID : A-17644
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FARMER, WENDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 CENTER OAK DR
 City CRANBERRY TOWNSHIP State PA Zip Code 16066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 206.59

Date of Receipt 11 / 20 / 2021
Transaction ID : A-17651
 Amount of Each Receipt this Period 10.61
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.61
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FARMER, WENDI, , ,

Mailing Address 205 CENTER OAK DR

City CRANBERRY TOWNSHIP	State PA	Zip Code 16066
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2021

Transaction ID : A-17650

Amount of Each Receipt this Period
10.61

Memo Item
CONTRIBUTION

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

Mailing Address 616 CHATAS CT.

City LAKE MARY	State FL	Zip Code 32746
-------------------	-------------	-------------------

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

Name of Employer (for Individual) STARONE DEALS LLC	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 04 / 2021

Transaction ID : A-17677

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 616 CHATAS CT.

City LAKE MARY	State FL	Zip Code 32746
-------------------	-------------	-------------------

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

Name of Employer (for Individual) STARONE DEALS LLC	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4030.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2021

Transaction ID : A-17676

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FAZEL, ALIRIDHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 CHATAS CT.
 City LAKE MARY State FL Zip Code 32746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STARONE DEALS LLC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4040.00

Date of Receipt 09 / 04 / 2021
Transaction ID : A-17675
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

B. FAZEL, ALIRIDHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 CHATAS CT.
 City LAKE MARY State FL Zip Code 32746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STARONE DEALS LLC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 10 / 04 / 2021
Transaction ID : A-17674
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

C. FAZEL, ALIRIDHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 CHATAS CT.
 City LAKE MARY State FL Zip Code 32746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STARONE DEALS LLC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4060.00

Date of Receipt 11 / 04 / 2021
Transaction ID : A-17673
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 124 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FAZEL, ALIRIDHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 616 CHATAS CT.
City LAKE MARY State FL Zip Code 32746
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) STARONE DEALS LLC Occupation (for Individual) BUSINESS OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4070.00

Date of Receipt 12 / 04 / 2021
Transaction ID : A-17672
Amount of Each Receipt this Period 10.00
 Memo Item
CONTRIBUTION

B. FICHTNER, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1223 NORTH TROOPER ROAD
City AUDUBON State PA Zip Code 19403
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ECOLANE Occupation (for Individual) IT DRONE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 850.00

Date of Receipt 12 / 12 / 2021
Transaction ID : A-17701
Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. FIELDS, JOSH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 ENTRADA STREET SOUTHEAST
City PALM BAY State FL Zip Code 32909
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) PUBLIX/ ARMY Occupation (for Individual) PHARMACIST
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 01 / 2021
Transaction ID : A-17711
Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FIELDS, JOSH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 ENTRADA STREET SOUTHEAST

City PALM BAY	State FL	Zip Code 32909
------------------	-------------	-------------------

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

Name of Employer (for Individual) PUBLIX/ ARMY	Occupation (for Individual) PHARMACIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2021

Transaction ID : A-17710

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 501 ENTRADA STREET SOUTHEAST

City PALM BAY	State FL	Zip Code 32909
------------------	-------------	-------------------

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

Name of Employer (for Individual) PUBLIX/ ARMY	Occupation (for Individual) PHARMACIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2021

Transaction ID : A-17709

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 501 ENTRADA STREET SOUTHEAST

City PALM BAY	State FL	Zip Code 32909
------------------	-------------	-------------------

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

Name of Employer (for Individual) PUBLIX/ ARMY	Occupation (for Individual) PHARMACIST
---	---

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
12		28		2021

Transaction ID : A-17708

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 126 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FITZSIMMONS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1151 NORTH MCCUE ST.
 APT A119
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLIPORESIGMA Occupation (for Individual) WAREHOUSE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 13 / 2021
Transaction ID : A-17737
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FITZSIMMONS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1151 NORTH MCCUE ST.
 APT A119
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLIPORESIGMA Occupation (for Individual) WAREHOUSE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 13 / 2021
Transaction ID : A-17738
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. FITZSIMMONS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1151 NORTH MCCUE ST.
 APT A119
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLIPORESIGMA Occupation (for Individual) WAREHOUSE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 13 / 2021
Transaction ID : A-17736
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 127 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FITZSIMMONS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1151 NORTH MCCUE ST.
 APT A119
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLIPORESIGMA Occupation (for Individual) WAREHOUSE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 13 / 2021
Transaction ID : A-17735
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. FITZSIMMONS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1151 NORTH MCCUE ST.
 APT A119
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLIPORESIGMA Occupation (for Individual) WAREHOUSE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 13 / 2021
Transaction ID : A-17734
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. FITZSIMMONS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1151 NORTH MCCUE ST.
 APT A119
 City LARAMIE State WY Zip Code 82072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLIPORESIGMA Occupation (for Individual) WAREHOUSE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 13 / 2021
Transaction ID : A-17733
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 128 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FORMAN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26469 KINGSVIEW LOOP NE
 City KINGSTON State WA Zip Code 98346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELL TECHLOGIX Occupation (for Individual) IT TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2021
Transaction ID : A-17800
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

B. FORMAN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26469 KINGSVIEW LOOP NE
 City KINGSTON State WA Zip Code 98346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELL TECHLOGIX Occupation (for Individual) IT TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2021
Transaction ID : A-17799
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

C. FORMAN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26469 KINGSVIEW LOOP NE
 City KINGSTON State WA Zip Code 98346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELL TECHLOGIX Occupation (for Individual) IT TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2021
Transaction ID : A-17798
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 129 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FORTUNE, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 424 NORTHWEST 148TH TERRACE

City EDMOND	State OK	Zip Code 73013
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF/SIDEJOB INC	Occupation (for Individual) COMPANY OWNER/SOFTWARE DEV
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
467.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2021

Transaction ID : A-17810

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 424 NORTHWEST 148TH TERRACE

City EDMOND	State OK	Zip Code 73013
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF/SIDEJOB INC	Occupation (for Individual) COMPANY OWNER/SOFTWARE DEV
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
492.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2021

Transaction ID : A-17809

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 424 NORTHWEST 148TH TERRACE

City EDMOND	State OK	Zip Code 73013
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF/SIDEJOB INC	Occupation (for Individual) COMPANY OWNER/SOFTWARE DEV
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
517.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2021

Transaction ID : A-17808

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FORTUNE, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 424 NORTHWEST 148TH TERRACE

City EDMOND	State OK	Zip Code 73013
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF/SIDEJOB INC	Occupation (for Individual) COMPANY OWNER/SOFTWARE DEV
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
542.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2021

Transaction ID : A-17807

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 424 NORTHWEST 148TH TERRACE

City EDMOND	State OK	Zip Code 73013
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF/SIDEJOB INC	Occupation (for Individual) COMPANY OWNER/SOFTWARE DEV
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
567.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2021

Transaction ID : A-17806

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 13618 FOREST BEND CIRCLE

City LOUISVILLE	State KY	Zip Code 40245
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HILL ROM	Occupation (for Individual) TECHNICIAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2021

Transaction ID : A-17814

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 131 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FOX, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13618 FOREST BEND CIRCLE
 City LOUISVILLE State KY Zip Code 40245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HILL ROM Occupation (for Individual) TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.92

Date of Receipt 10 / 04 / 2021
Transaction ID : A-17813
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. FOX, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13618 FOREST BEND CIRCLE
 City LOUISVILLE State KY Zip Code 40245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HILL ROM Occupation (for Individual) TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.92

Date of Receipt 11 / 04 / 2021
Transaction ID : A-17812
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. FOX, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13618 FOREST BEND CIRCLE
 City LOUISVILLE State KY Zip Code 40245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HILL ROM Occupation (for Individual) TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.92

Date of Receipt 12 / 04 / 2021
Transaction ID : A-17811
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 132 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. FOX, JORDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1019 PAR AVE
 City LEMOORE State CA Zip Code 93245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CED Occupation (for Individual) OUTSIDE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **12 / 02 / 2021**
Transaction ID : A-17817
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. FRANGIOSA, RICHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 RIVER DRIVE
 City BAILEY State CO Zip Code 80421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADV MORTGAGE Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 24 / 2021**
Transaction ID : A-17830
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. GAMBRELL, JORDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 KENT ROAD
 City NASHVILLE State TN Zip Code 37214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt **07 / 07 / 2021**
Transaction ID : A-17899
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GAMBRELL, JORDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 KENT ROAD
 City NASHVILLE State TN Zip Code 37214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 08 / 07 / 2021
Transaction ID : A-17898
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. GAMBRELL, JORDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 KENT ROAD
 City NASHVILLE State TN Zip Code 37214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1205.00

Date of Receipt 09 / 07 / 2021
Transaction ID : A-17897
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. GAMBRELL, JORDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 KENT ROAD
 City NASHVILLE State TN Zip Code 37214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1305.00

Date of Receipt 10 / 07 / 2021
Transaction ID : A-17896
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GAMBRELL, JORDAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 KENT ROAD

City NASHVILLE	State TN	Zip Code 37214
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PROPERTY MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2021

Transaction ID : A-17895

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 305 KENT ROAD

City NASHVILLE	State TN	Zip Code 37214
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PROPERTY MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2021

Transaction ID : A-17894

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 12405 TURTLE ROCK RD
B

City AUSTIN	State TX	Zip Code 78729
----------------	-------------	-------------------

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

Name of Employer (for Individual) EXPERIAN (CSID)	Occupation (for Individual) LICENSED FRAUD INVESTIGATOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2021

Transaction ID : A-17923

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 525
	<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)
MISES PAC

A. GARCIA, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12405 TURTLE ROCK RD
 B
 City AUSTIN State TX Zip Code 78729
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) EXPERIAN (CSID) Occupation (for Individual) LICENSED FRAUD INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2021
Transaction ID : A-17922
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GARLAND, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 552 E MAIN ST
 APT 204
 City STATESBORO State GA Zip Code 30461
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) HAJCO Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2021
Transaction ID : A-17949
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GARLAND, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 552 E MAIN ST
 APT 204
 City STATESBORO State GA Zip Code 30461
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) HAJCO Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2021
Transaction ID : A-17948
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 136 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GARRISON, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 CHURCHILL ROAD

City SOUTH PORTLAND	State ME	Zip Code 04106
------------------------	-------------	-------------------

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

Name of Employer (for Individual) BACHMANN INDUSTRIES	Occupation (for Individual) SALES MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2021

Transaction ID : A-17969

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 14 CHURCHILL ROAD

City SOUTH PORTLAND	State ME	Zip Code 04106
------------------------	-------------	-------------------

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

Name of Employer (for Individual) BACHMANN INDUSTRIES	Occupation (for Individual) SALES MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2021

Transaction ID : A-17968

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 14 CHURCHILL ROAD

City SOUTH PORTLAND	State ME	Zip Code 04106
------------------------	-------------	-------------------

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

Name of Employer (for Individual) BACHMANN INDUSTRIES	Occupation (for Individual) SALES MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2021

Transaction ID : A-17967

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 137 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GARRISON, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 CHURCHILL ROAD

City SOUTH PORTLAND	State ME	Zip Code 04106
------------------------	-------------	-------------------

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

Name of Employer (for Individual) BACHMANN INDUSTRIES	Occupation (for Individual) SALES MANAGEMENT
--	---

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
12		23		2021

Transaction ID : A-17966

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 6104 HEWETSON DRIVE

City THE HILLS	State TX	Zip Code 78738
-------------------	-------------	-------------------

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

Name of Employer (for Individual) TECHNIGLOVE INT.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2021

Transaction ID : A-17983

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 6104 HEWETSON DRIVE

City THE HILLS	State TX	Zip Code 78738
-------------------	-------------	-------------------

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

Name of Employer (for Individual) TECHNIGLOVE INT.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2021

Transaction ID : A-17982

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GASS, ROGER, , ,		Date of Receipt
Mailing Address 6104 HEWETSON DRIVE		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2021"/>
City THE HILLS	State TX	Zip Code 78738
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17981
Name of Employer (for Individual) TECHNIGLOVE INT.		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) OWNER		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GASS, ROGER, , ,		Date of Receipt
Mailing Address 6104 HEWETSON DRIVE		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2021"/>
City THE HILLS	State TX	Zip Code 78738
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17980
Name of Employer (for Individual) TECHNIGLOVE INT.		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) OWNER		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GASS, ROGER, , ,		Date of Receipt
Mailing Address 6104 HEWETSON DRIVE		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2021"/>
City THE HILLS	State TX	Zip Code 78738
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-17979
Name of Employer (for Individual) TECHNIGLOVE INT.		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) OWNER		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 139 OF 525
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GEORGE, CHRIS, , ,

Mailing Address 6201 W. 61ST TER.

City MISSION	State KS	Zip Code 66202
-----------------	-------------	-------------------

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

Name of Employer (for Individual) CHRIS GEORGE CUSTOM HOMES	Occupation (for Individual) HOME BUILDER / REALTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2021

Transaction ID : A-18015

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 6201 W. 61ST TER.

City MISSION	State KS	Zip Code 66202
-----------------	-------------	-------------------

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

Name of Employer (for Individual) CHRIS GEORGE CUSTOM HOMES	Occupation (for Individual) HOME BUILDER / REALTOR
--	---

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
11		14		2021

Transaction ID : A-18014

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 6201 W. 61ST TER.

City MISSION	State KS	Zip Code 66202
-----------------	-------------	-------------------

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

Name of Employer (for Individual) CHRIS GEORGE CUSTOM HOMES	Occupation (for Individual) HOME BUILDER / REALTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2021

Transaction ID : A-18013

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 140 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. GIBSON, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 KINGS CT
 City WILLIAMSBURG State VA Zip Code 23185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAY EQUIPMENT CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 21 / 2021
Transaction ID : A-18026
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GIBSON, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 KINGS CT
 City WILLIAMSBURG State VA Zip Code 23185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAY EQUIPMENT CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 16 / 2021
Transaction ID : A-18025
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GIBSON, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 KINGS CT
 City WILLIAMSBURG State VA Zip Code 23185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAY EQUIPMENT CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 21 / 2021
Transaction ID : A-18024
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 141 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GIBSON, LEE, , ,			Date of Receipt
Mailing Address 265 KINGS CT			<input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2021"/>
City WILLIAMSBURG	State VA	Zip Code 23185	Transaction ID : A-18023
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) BAY EQUIPMENT CO		Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GILKEY, MYLES, , ,			Date of Receipt
Mailing Address 27111 216TH AVE SE			<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2021"/>
City MAPLE VALLEY	State WA	Zip Code 98038	Transaction ID : A-18046
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) MYLES SCOTT RESTAURANT PRODUCTIONS		Occupation (for Individual) RESTAURANT CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GOENS, STEPHANIE, , ,			Date of Receipt
Mailing Address 2236 FAUVER AVENUE			<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2021"/>
City DAYTON	State OH	Zip Code 45420	Transaction ID : A-18083
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="70.00"/>
Name of Employer (for Individual) TACG		Occupation (for Individual) OPS MGR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="345.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GOENS, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2236 FAUVER AVENUE
 City DAYTON State OH Zip Code 45420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TACG Occupation (for Individual) OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 12 / 20 / 2021
Transaction ID : A-18082
 Amount of Each Receipt this Period 70.00
 Memo Item
CONTRIBUTION

B. GOETTLING, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1257 BIRKHALL DR
 City LAWRENCEVILLE State GA Zip Code 30043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTSUKA AMERICA PHARMACEUTICAL INC. Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.80

Date of Receipt 12 / 25 / 2021
Transaction ID : A-18088
 Amount of Each Receipt this Period 15.00
 Memo Item
CONTRIBUTION

C. GOODE, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2376 HEMLOCK DRIVE
 City HUEYTOWN State AL Zip Code 35023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JB HUNT Occupation (for Individual) WAREHOUSE HELPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 13 / 2021
Transaction ID : A-18121
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GOODE, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2376 HEMLOCK DRIVE
 City HUEYTOWN State AL Zip Code 35023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
JB HUNT WAREHOUSE HELPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2021
Transaction ID : A-18120
 Amount of Each Receipt this Period
 25.00
 Memo Item
CONTRIBUTION

B. GOODE, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2376 HEMLOCK DRIVE
 City HUEYTOWN State AL Zip Code 35023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
JB HUNT WAREHOUSE HELPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2021
Transaction ID : A-18119
 Amount of Each Receipt this Period
 25.00
 Memo Item
CONTRIBUTION

C. GOODE, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2376 HEMLOCK DRIVE
 City HUEYTOWN State AL Zip Code 35023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
JB HUNT WAREHOUSE HELPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2021
Transaction ID : A-18118
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 144 OF 525
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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. GORE, MASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 EAST SHERIDAN AVENUE
 2138
 City OKLAHOMA CITY State OK Zip Code 73104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) ABM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2021
Transaction ID : A-18141
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. GORE, MASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 EAST SHERIDAN AVENUE
 2138
 City OKLAHOMA CITY State OK Zip Code 73104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) ABM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2021
Transaction ID : A-18140
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. GORE, MASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 EAST SHERIDAN AVENUE
 2138
 City OKLAHOMA CITY State OK Zip Code 73104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) ABM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2021
Transaction ID : A-18139
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GORE, MASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 EAST SHERIDAN AVENUE
 2138
 City OKLAHOMA CITY State OK Zip Code 73104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) ABM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 477.40

Date of Receipt 10 / 11 / 2021
Transaction ID : A-18138
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. GORE, MASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 EAST SHERIDAN AVENUE
 2138
 City OKLAHOMA CITY State OK Zip Code 73104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) ABM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 527.40

Date of Receipt 11 / 11 / 2021
Transaction ID : A-18137
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. GORE, MASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 EAST SHERIDAN AVENUE
 2138
 City OKLAHOMA CITY State OK Zip Code 73104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) ABM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 577.40

Date of Receipt 12 / 11 / 2021
Transaction ID : A-18136
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 525
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. GREENE, KRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 OLD TOWN RD
 City ADDISON State ME Zip Code 04606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LOBSTER FISHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2021
Transaction ID : A-18180
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREENE, KRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 OLD TOWN RD
 City ADDISON State ME Zip Code 04606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LOBSTER FISHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2021
Transaction ID : A-18179
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREENE, KRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 OLD TOWN RD
 City ADDISON State ME Zip Code 04606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LOBSTER FISHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2021
Transaction ID : A-18178
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 147 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GREENE, KRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 OLD TOWN RD
 City ADDISON State ME Zip Code 04606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LOBSTER FISHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2021
Transaction ID : A-18177
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREENE, KRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 OLD TOWN RD
 City ADDISON State ME Zip Code 04606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LOBSTER FISHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 30 / 2021
Transaction ID : A-18176
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREENE, KRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 OLD TOWN RD
 City ADDISON State ME Zip Code 04606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LOBSTER FISHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 30 / 2021
Transaction ID : A-18175
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GRUBER, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 FOREST PARK CT
 City PACIFICA State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SQUARE, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **07 / 25 / 2021**
Transaction ID : A-18210
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. GRUBER, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 FOREST PARK CT
 City PACIFICA State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SQUARE, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **08 / 25 / 2021**
Transaction ID : A-18209
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GRUBER, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 FOREST PARK CT
 City PACIFICA State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SQUARE, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **09 / 25 / 2021**
Transaction ID : A-18208
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GRUBER, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 FOREST PARK CT
 City PACIFICA State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SQUARE, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 10 / 25 / 2021
Transaction ID : A-18207
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. GRUBER, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 FOREST PARK CT
 City PACIFICA State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SQUARE, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 11 / 25 / 2021
Transaction ID : A-18206
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GRUBER, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 FOREST PARK CT
 City PACIFICA State CA Zip Code 94044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SQUARE, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 12 / 25 / 2021
Transaction ID : A-18205
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. HAGOPIAN, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11290 SOUTH 72ND EAST COURT
 City BIXBY State OK Zip Code 74008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKSHIRE HATHAWAY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 07 / 06 / 2021
Transaction ID : A-18248
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAGOPIAN, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11290 SOUTH 72ND EAST COURT
 City BIXBY State OK Zip Code 74008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKSHIRE HATHAWAY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 07 / 20 / 2021
Transaction ID : A-18247
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAGOPIAN, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11290 SOUTH 72ND EAST COURT
 City BIXBY State OK Zip Code 74008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKSHIRE HATHAWAY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 07 / 28 / 2021
Transaction ID : A-18246
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 151 OF 525
<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. HAGOPIAN, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11290 SOUTH 72ND EAST COURT
 City BIXBY State OK Zip Code 74008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKSHIRE HATHAWAY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 08 / 06 / 2021
Transaction ID : A-18245
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. HAGOPIAN, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11290 SOUTH 72ND EAST COURT
 City BIXBY State OK Zip Code 74008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKSHIRE HATHAWAY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 09 / 06 / 2021
Transaction ID : A-18244
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. HAGOPIAN, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11290 SOUTH 72ND EAST COURT
 City BIXBY State OK Zip Code 74008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKSHIRE HATHAWAY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt 10 / 06 / 2021
Transaction ID : A-18243
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. HAGOPIAN, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11290 SOUTH 72ND EAST COURT

City BIXBY	State OK	Zip Code 74008
---------------	-------------	-------------------

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

Name of Employer (for Individual) BERKSHIRE HATHAWAY	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2021

Transaction ID : A-18242

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

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

Mailing Address 11290 SOUTH 72ND EAST COURT

City BIXBY	State OK	Zip Code 74008
---------------	-------------	-------------------

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

Name of Employer (for Individual) BERKSHIRE HATHAWAY	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 06 / 2021

Transaction ID : A-18241

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

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

Mailing Address 7925 SHADY OAK TRL #13

City CHARLOTTE	State NC	Zip Code 28210
-------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
209.10

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2021

Transaction ID : A-18334

Amount of Each Receipt this Period
20.91

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 153 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. HARDISON, SIMON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7925 SHADY OAK TRL #13

City CHARLOTTE	State NC	Zip Code 28210
-------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2021

Transaction ID : A-18333

Amount of Each Receipt this Period
20.91

Memo Item
CONTRIBUTION

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

Mailing Address 7925 SHADY OAK TRL #13

City CHARLOTTE	State NC	Zip Code 28210
-------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2021

Transaction ID : A-18332

Amount of Each Receipt this Period
20.91

Memo Item
CONTRIBUTION

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

Mailing Address 230 GLENBROOKE WAY

City GREENVILLE	State SC	Zip Code 29615
--------------------	-------------	-------------------

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

Name of Employer (for Individual) PYROTEK	Occupation (for Individual) ACCOUNT ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2021

Transaction ID : A-18400

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	66.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HARTWIG, MATTHEW, , ,

Mailing Address 6259 SOUTH BLYTHE AVENUE

City FRESNO	State CA	Zip Code 93706
----------------	-------------	-------------------

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

Name of Employer (for Individual) MADDOX MANAGEMENT COMPANY	Occupation (for Individual) PEST CONTROL ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2021

Transaction ID : A-18412

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 6259 SOUTH BLYTHE AVENUE

City FRESNO	State CA	Zip Code 93706
----------------	-------------	-------------------

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

Name of Employer (for Individual) MADDOX MANAGEMENT COMPANY	Occupation (for Individual) PEST CONTROL ADVISOR
--	---

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
10		01		2021

Transaction ID : A-18411

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 6259 SOUTH BLYTHE AVENUE

City FRESNO	State CA	Zip Code 93706
----------------	-------------	-------------------

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

Name of Employer (for Individual) MADDOX MANAGEMENT COMPANY	Occupation (for Individual) PEST CONTROL ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2021

Transaction ID : A-18410

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. HARTWIG, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6259 SOUTH BLYTHE AVENUE
 City FRESNO State CA Zip Code 93706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MADDUX MANAGEMENT COMPANY Occupation (for Individual) PEST CONTROL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 01 / 2021**
Transaction ID : A-18409
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. 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
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) PROCUREMENT MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt **07 / 24 / 2021**
Transaction ID : A-18430
 Amount of Each Receipt this Period 200.00
 Memo Item
 CONTRIBUTION

C. 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
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) PROCUREMENT MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt **08 / 24 / 2021**
Transaction ID : A-18429
 Amount of Each Receipt this Period 200.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 525
	<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)
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
---------------------	-------------	-------------------

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

Name of Employer (for Individual) USAA	Occupation (for Individual) PROCUREMENT MGR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2021
Transaction ID : A-18428

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. 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
---------------------	-------------	-------------------

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

Name of Employer (for Individual) USAA	Occupation (for Individual) PROCUREMENT MGR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2021
Transaction ID : A-18427

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. 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
---------------------	-------------	-------------------

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

Name of Employer (for Individual) USAA	Occupation (for Individual) PROCUREMENT MGR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2021
Transaction ID : A-18426

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 157 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
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
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) PROCUREMENT MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt **12 / 24 / 2021**
Transaction ID : A-18425
 Amount of Each Receipt this Period 200.00
 Memo Item
 CONTRIBUTION

B. HATCH, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 NORTH CIVIC DRIVE 300
 City WALNUT CREEK State CA Zip Code 94596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 06 / 2021**
Transaction ID : A-18441
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. HATCH, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 NORTH CIVIC DRIVE 300
 City WALNUT CREEK State CA Zip Code 94596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 06 / 2021**
Transaction ID : A-18440
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 158 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. HATCH, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 NORTH CIVIC DRIVE
 300
 City WALNUT CREEK State CA Zip Code 94596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 06 / 2021
Transaction ID : A-18439
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HATCH, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 NORTH CIVIC DRIVE
 300
 City WALNUT CREEK State CA Zip Code 94596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2021
Transaction ID : A-18438
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HATCH, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 NORTH CIVIC DRIVE
 300
 City WALNUT CREEK State CA Zip Code 94596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 06 / 2021
Transaction ID : A-18437
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 159 OF 525
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISES PAC

A. HENAGER, ADAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1937 FAYWOOD STREET

City LAS VEGAS	State NV	Zip Code 89134
-------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) N/A
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2021

Transaction ID : A-18543

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

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

Mailing Address 1937 FAYWOOD STREET

City LAS VEGAS	State NV	Zip Code 89134
-------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) N/A
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2021

Transaction ID : A-18542

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

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

Mailing Address 30215 BRAMBLEVINE DR.

City MAGNOLIA	State TX	Zip Code 77355
------------------	-------------	-------------------

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

Name of Employer (for Individual) MONKEY FAB GARAGE	Occupation (for Individual) FABRICATOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	09	/	2021

Transaction ID : A-18566

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 160 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. HENNESSEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30215 BRAMBLEVINE DR.
 City MAGNOLIA State TX Zip Code 77355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONKEY FAB GARAGE Occupation (for Individual) FABRICATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 09 / 2021
Transaction ID : A-18565
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. HENNESSEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30215 BRAMBLEVINE DR.
 City MAGNOLIA State TX Zip Code 77355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONKEY FAB GARAGE Occupation (for Individual) FABRICATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 09 / 2021
Transaction ID : A-18564
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. HENNESSEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30215 BRAMBLEVINE DR.
 City MAGNOLIA State TX Zip Code 77355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONKEY FAB GARAGE Occupation (for Individual) FABRICATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 09 / 2021
Transaction ID : A-18563
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 161 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. HENNESSEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30215 BRAMBLEVINE DR.
 City MAGNOLIA State TX Zip Code 77355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONKEY FAB GARAGE Occupation (for Individual) FABRICATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 09 / 2021
Transaction ID : A-18562
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HENNESSEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30215 BRAMBLEVINE DR.
 City MAGNOLIA State TX Zip Code 77355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONKEY FAB GARAGE Occupation (for Individual) FABRICATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 09 / 2021
Transaction ID : A-18561
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HLAVKA, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 SW 9TH ST
 City HALLANDALE BEACH State FL Zip Code 33009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIDS Occupation (for Individual) STORE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 209.40

Date of Receipt 09 / 08 / 2021
Transaction ID : A-18672
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 115.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 162 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HLAVKA, JOSHUA, , ,

Mailing Address 107 SW 9TH ST

City HALLANDALE BEACH State FL Zip Code 33009

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

Name of Employer (for Individual) LIDS Occupation (for Individual) STORE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.40

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2021

Transaction ID : A-18671

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

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

Mailing Address 107 SW 9TH ST

City HALLANDALE BEACH State FL Zip Code 33009

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

Name of Employer (for Individual) LIDS Occupation (for Individual) STORE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.40

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 11 / 2021

Transaction ID : A-18670

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

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

Mailing Address 107 SW 9TH ST

City HALLANDALE BEACH State FL Zip Code 33009

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

Name of Employer (for Individual) LIDS Occupation (for Individual) STORE MANAGER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
254.40

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 08 / 2021

Transaction ID : A-18669

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. HUGHES, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4008 PINAR DRIVE
 City BRADENTON State FL Zip Code 34210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINE CREST CAPITAL PARTNERS LLC Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2021
Transaction ID : A-18796
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. INGALLS, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 INGALLS POND RD
 City MILFORD State NY Zip Code 13807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2021
Transaction ID : A-18835
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. INGALLS, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 INGALLS POND RD
 City MILFORD State NY Zip Code 13807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2021
Transaction ID : A-18834
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 164 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. INGALLS, BENJAMIN, , ,

Mailing Address 132 INGALLS POND RD

City MILFORD	State NY	Zip Code 13807
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2021

Transaction ID : A-18833

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 132 INGALLS POND RD

City MILFORD	State NY	Zip Code 13807
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 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
12	/	12	/	2021

Transaction ID : A-18832

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 173 SCOTT ROAD

City LEDBETTER	State KY	Zip Code 42058
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BARGE TRANSFER SERVICES	Occupation (for Individual) OFFICE ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
479.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	09	/	2021

Transaction ID : A-18856

Amount of Each Receipt this Period
26.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	76.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MISES PAC

A. JACO, JILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 173 SCOTT ROAD

City LEDBETTER	State KY	Zip Code 42058
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BARGE TRANSFER SERVICES	Occupation (for Individual) OFFICE ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2021

Transaction ID : A-18855

Amount of Each Receipt this Period
26.00

Memo Item
CONTRIBUTION

B. JACO, JILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 173 SCOTT ROAD

City LEDBETTER	State KY	Zip Code 42058
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BARGE TRANSFER SERVICES	Occupation (for Individual) OFFICE ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
531.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : A-18854

Amount of Each Receipt this Period
26.00

Memo Item
CONTRIBUTION

C. JACO, JILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 173 SCOTT ROAD

City LEDBETTER	State KY	Zip Code 42058
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BARGE TRANSFER SERVICES	Occupation (for Individual) OFFICE ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
557.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2021

Transaction ID : A-18853

Amount of Each Receipt this Period
26.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	78.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 166 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JACO, JILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 173 SCOTT ROAD

City LEDBETTER	State KY	Zip Code 42058
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BARGE TRANSFER SERVICES	Occupation (for Individual) OFFICE ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
582.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2021

Transaction ID : A-18852

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 173 SCOTT ROAD

City LEDBETTER	State KY	Zip Code 42058
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BARGE TRANSFER SERVICES	Occupation (for Individual) OFFICE ADMINISTRATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
607.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2021

Transaction ID : A-18851

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 640 DAVIS STREET #31

City SAN FRANCISCO	State CA	Zip Code 94111
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) SELF-EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2021

Transaction ID : A-18892

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 167 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JEFFRIES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 DAVIS STREET #31
 City SAN FRANCISCO State CA Zip Code 94111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 10 / 2021
Transaction ID : A-18891
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JEFFRIES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 DAVIS STREET #31
 City SAN FRANCISCO State CA Zip Code 94111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 10 / 2021
Transaction ID : A-18890
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JEFFRIES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 DAVIS STREET #31
 City SAN FRANCISCO State CA Zip Code 94111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 10 / 2021
Transaction ID : A-18889
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 525
	<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. JENNEMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 GIRARD AVE N, APT 1
 City MINNEAPOLIS State MN Zip Code 55411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTELLUM Occupation (for Individual) PLATFORM SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.38

Date of Receipt 09 / 01 / 2021
Transaction ID : A-18912
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JENNEMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 GIRARD AVE N, APT 1
 City MINNEAPOLIS State MN Zip Code 55411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTELLUM Occupation (for Individual) PLATFORM SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.38

Date of Receipt 10 / 01 / 2021
Transaction ID : A-18911
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JENNEMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 GIRARD AVE N, APT 1
 City MINNEAPOLIS State MN Zip Code 55411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTELLUM Occupation (for Individual) PLATFORM SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 261.38

Date of Receipt 11 / 01 / 2021
Transaction ID : A-18910
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 169 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JENNEMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 GIRARD AVE N, APT 1
 City MINNEAPOLIS State MN Zip Code 55411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTELLUM Occupation (for Individual) PLATFORM SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.38

Date of Receipt **12 / 01 / 2021**
Transaction ID : A-18909
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JENNINGS, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10291 NORMANDY WAY
 City FISHERS State IN Zip Code 46040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOGLE Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **09 / 11 / 2021**
Transaction ID : A-18918
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JENNINGS, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10291 NORMANDY WAY
 City FISHERS State IN Zip Code 46040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOGLE Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **10 / 11 / 2021**
Transaction ID : A-18917
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 170 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JENNINGS, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10291 NORMANDY WAY
 City FISHERS State IN Zip Code 46040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOGLE Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 11 / 2021
Transaction ID : A-18916
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JENNINGS, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10291 NORMANDY WAY
 City FISHERS State IN Zip Code 46040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOGLE Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.99

Date of Receipt 11 / 30 / 2021
Transaction ID : A-23307
 Amount of Each Receipt this Period 34.99
 Memo Item CONTRIBUTION

C. JENNINGS, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10291 NORMANDY WAY
 City FISHERS State IN Zip Code 46040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOGLE Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 319.99

Date of Receipt 12 / 11 / 2021
Transaction ID : A-18915
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 84.99
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 171 OF 525
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JOHNSON, BLAIR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21999 EAST CAMACHO ROAD

City QUEEN CREEK	State AZ	Zip Code 85142
---------------------	-------------	-------------------

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

Name of Employer (for Individual) INTEL	Occupation (for Individual) MANUFACTURING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2021

Transaction ID : A-18997

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 21999 EAST CAMACHO ROAD

City QUEEN CREEK	State AZ	Zip Code 85142
---------------------	-------------	-------------------

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

Name of Employer (for Individual) INTEL	Occupation (for Individual) MANUFACTURING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2021

Transaction ID : A-18996

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 21999 EAST CAMACHO ROAD

City QUEEN CREEK	State AZ	Zip Code 85142
---------------------	-------------	-------------------

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

Name of Employer (for Individual) INTEL	Occupation (for Individual) MANUFACTURING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2021

Transaction ID : A-18995

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JOHNSON, BLAIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21999 EAST CAMACHO ROAD
 City QUEEN CREEK State AZ Zip Code 85142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) MANUFACTURING TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.70

Date of Receipt 10 / 21 / 2021
Transaction ID : A-18994
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. JOHNSON, BLAIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21999 EAST CAMACHO ROAD
 City QUEEN CREEK State AZ Zip Code 85142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) MANUFACTURING TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.70

Date of Receipt 11 / 21 / 2021
Transaction ID : A-18993
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. JOHNSON, BLAIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21999 EAST CAMACHO ROAD
 City QUEEN CREEK State AZ Zip Code 85142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) MANUFACTURING TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.70

Date of Receipt 12 / 21 / 2021
Transaction ID : A-18992
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 173 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JOHNSON, BRIAN, , ,			Date of Receipt
Mailing Address 2331 HUNTER STREET			<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2021"/>
City TYLER	State TX	Zip Code 75701	Transaction ID : A-18985
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) MEWBOURNE OIL COMPANY		Occupation (for Individual) SOFTWARE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="254.40"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JOHNSON, BRIAN, , ,			Date of Receipt
Mailing Address 2331 HUNTER STREET			<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2021"/>
City TYLER	State TX	Zip Code 75701	Transaction ID : A-18984
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) MEWBOURNE OIL COMPANY		Occupation (for Individual) SOFTWARE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="279.40"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JOHNSON, BRIAN, , ,			Date of Receipt
Mailing Address 2331 HUNTER STREET			<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2021"/>
City TYLER	State TX	Zip Code 75701	Transaction ID : A-18991
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5.00"/>
Name of Employer (for Individual) MEWBOURNE OIL COMPANY		Occupation (for Individual) SOFTWARE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="284.40"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="40.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 174 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.40

Date of Receipt 08 / 09 / 2021
Transaction ID : A-18983
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 319.40

Date of Receipt 08 / 10 / 2021
Transaction ID : A-18982
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 324.40

Date of Receipt 08 / 19 / 2021
Transaction ID : A-18990
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 40.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.40

Date of Receipt 09 / 09 / 2021
Transaction ID : A-18981
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.40

Date of Receipt 09 / 10 / 2021
Transaction ID : A-18980
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.40

Date of Receipt 09 / 19 / 2021
Transaction ID : A-18989
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 40.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 176 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Mailing Address 2331 HUNTER STREET

City TYLER	State TX	Zip Code 75701
---------------	-------------	-------------------

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

Name of Employer (for Individual) MEWBOURNE OIL COMPANY	Occupation (for Individual) SOFTWARE DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
374.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2021

Transaction ID : A-18979

Amount of Each Receipt this Period

40.00

Memo Item CONTRIBUTION

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

Mailing Address 2331 HUNTER STREET

City TYLER	State TX	Zip Code 75701
---------------	-------------	-------------------

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

Name of Employer (for Individual) MEWBOURNE OIL COMPANY	Occupation (for Individual) SOFTWARE DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
399.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2021

Transaction ID : A-18978

Amount of Each Receipt this Period

25.00

Memo Item CONTRIBUTION

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

Mailing Address 2331 HUNTER STREET

City TYLER	State TX	Zip Code 75701
---------------	-------------	-------------------

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

Name of Employer (for Individual) MEWBOURNE OIL COMPANY	Occupation (for Individual) SOFTWARE DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
404.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2021

Transaction ID : A-18988

Amount of Each Receipt this Period

5.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 177 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JOHNSON, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2331 HUNTER STREET

City TYLER	State TX	Zip Code 75701
---------------	-------------	-------------------

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

Name of Employer (for Individual) MEWBOURNE OIL COMPANY	Occupation (for Individual) SOFTWARE DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
414.40

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2021

Transaction ID : A-18977

Amount of Each Receipt this Period

40.00

Memo Item
CONTRIBUTION

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

Mailing Address 2331 HUNTER STREET

City TYLER	State TX	Zip Code 75701
---------------	-------------	-------------------

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

Name of Employer (for Individual) MEWBOURNE OIL COMPANY	Occupation (for Individual) SOFTWARE DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
439.40

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		10		2021

Transaction ID : A-18976

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

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

Mailing Address 2331 HUNTER STREET

City TYLER	State TX	Zip Code 75701
---------------	-------------	-------------------

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

Name of Employer (for Individual) MEWBOURNE OIL COMPANY	Occupation (for Individual) SOFTWARE DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
444.40

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		19		2021

Transaction ID : A-18987

Amount of Each Receipt this Period

5.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 454.40

Date of Receipt 12 / 09 / 2021
Transaction ID : A-18975
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 479.40

Date of Receipt 12 / 10 / 2021
Transaction ID : A-18974
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HUNTER STREET
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEWBOURNE OIL COMPANY Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 484.40

Date of Receipt 12 / 19 / 2021
Transaction ID : A-18986
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 40.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 179 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JURCHAK, MARC, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 16 / 2021
Mailing Address 373 FAIRVILLE ROAD			Transaction ID : A-19048
City CHADDS FORD	State PA	Zip Code 19317	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) L3HARRIS		Occupation (for Individual) ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 709.81	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JURCHAK, MARC, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 16 / 2021
Mailing Address 373 FAIRVILLE ROAD			Transaction ID : A-19047
City CHADDS FORD	State PA	Zip Code 19317	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) L3HARRIS		Occupation (for Individual) ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 809.81	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JURCHAK, MARC, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 16 / 2021
Mailing Address 373 FAIRVILLE ROAD			Transaction ID : A-19046
City CHADDS FORD	State PA	Zip Code 19317	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) L3HARRIS		Occupation (for Individual) ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 909.81	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 180 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. JURCHAK, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 FAIRVILLE ROAD
 City CHADDS FORD State PA Zip Code 19317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L3HARRIS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1009.81

Date of Receipt **10 / 16 / 2021**
Transaction ID : A-19045
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. JURCHAK, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 FAIRVILLE ROAD
 City CHADDS FORD State PA Zip Code 19317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L3HARRIS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1109.81

Date of Receipt **11 / 16 / 2021**
Transaction ID : A-19044
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. JURCHAK, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 FAIRVILLE ROAD
 City CHADDS FORD State PA Zip Code 19317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L3HARRIS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1209.81

Date of Receipt **12 / 16 / 2021**
Transaction ID : A-19043
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 181 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KALICH, DOMINIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24500 HARMON
 City ST CLAIR SHORES State MI Zip Code 48080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMROCK Occupation (for Individual) TEAM LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 13 / 2021**
Transaction ID : A-19067
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KALICH, DOMINIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24500 HARMON
 City ST CLAIR SHORES State MI Zip Code 48080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMROCK Occupation (for Individual) TEAM LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 13 / 2021**
Transaction ID : A-19066
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KALICH, DOMINIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24500 HARMON
 City ST CLAIR SHORES State MI Zip Code 48080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMROCK Occupation (for Individual) TEAM LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **12 / 13 / 2021**
Transaction ID : A-19065
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 182 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KAUFFMAN, JEREMY, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2021
Mailing Address 349 MANCHESTER STREET			Transaction ID : A-19105
City MANCHESTER	State NH	Zip Code 03103	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) LBRY		Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KEAHEY, DAVID, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 27 / 2021
Mailing Address 6614 W PAPAGO ST			Transaction ID : A-19115
City PHOENIX	State AZ	Zip Code 85043	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) AUTO ZONE		Occupation (for Individual) PIE OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.98		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KEAHEY, DAVID, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2021
Mailing Address 6614 W PAPAGO ST			Transaction ID : A-19114
City PHOENIX	State AZ	Zip Code 85043	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) AUTO ZONE		Occupation (for Individual) PIE OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 244.98		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 183 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KEAHEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6614 W PAPAGO ST
 City PHOENIX State AZ Zip Code 85043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUTO ZONE Occupation (for Individual) PIE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.98

Date of Receipt 10 / 27 / 2021
Transaction ID : A-19113
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KEEN, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 EAGLES NEST
 City ARBOLES State CO Zip Code 81121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPS Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 23 / 2021
Transaction ID : A-19119
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KEEN, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 EAGLES NEST
 City ARBOLES State CO Zip Code 81121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPS Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 23 / 2021
Transaction ID : A-19118
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 184 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KEEN, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 EAGLES NEST
 City ARBOLES State CO Zip Code 81121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPS Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **12 / 23 / 2021**
Transaction ID : A-19117
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. KELLY, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4749 18TH STREET
 City SAN FRANCISCO State CA Zip Code 94114
 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 **09 / 18 / 2021**
Transaction ID : A-19139
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. KELLY, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4749 18TH STREET
 City SAN FRANCISCO State CA Zip Code 94114
 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 ▼ 300.00

Date of Receipt **10 / 18 / 2021**
Transaction ID : A-19138
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 185 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KELLY, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4749 18TH STREET
 City SAN FRANCISCO State CA Zip Code 94114
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2021
Transaction ID : A-19137
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. KELLY, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4749 18TH STREET
 City SAN FRANCISCO State CA Zip Code 94114
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2021
Transaction ID : A-19136
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. KERGIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 480 DELAFIELD AVE
 City STATEN ISLAND State NY Zip Code 10310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DSNY Occupation (for Individual) SANITATION WORKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2021
Transaction ID : A-19172
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KERGIS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 DELAFIELD AVE

City STATEN ISLAND	State NY	Zip Code 10310
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) DSNY	Occupation (for Individual) SANITATION WORKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2021

Transaction ID : A-19171

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 480 DELAFIELD AVE

City STATEN ISLAND	State NY	Zip Code 10310
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) DSNY	Occupation (for Individual) SANITATION WORKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2021

Transaction ID : A-19170

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 1425 EAST CARDINAL LANE

City DERBY	State KS	Zip Code 67037
---------------	-------------	-------------------

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

Name of Employer (for Individual) JACO GENERAL CONTRACTOR, INC.	Occupation (for Individual) GENERAL CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2021

Transaction ID : A-19193

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KISIN, ILYA, , ,			Date of Receipt
Mailing Address 928 CALLE SIMPATICO			<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2021"/>
City GLENDALE	State CA	Zip Code 91208	Transaction ID : A-19194
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) KISIN WEALTH MANAGEMENT LLC		Occupation (for Individual) FINANCIAL ADVISOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KLASSEN, TYLER, , ,			Date of Receipt
Mailing Address 964 SANTA ANA DRIVE			<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2021"/>
City GREENWOOD	State IN	Zip Code 46143	Transaction ID : A-19204
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) PLACE		Occupation (for Individual) YUP	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KLASSEN, TYLER, , ,			Date of Receipt
Mailing Address 964 SANTA ANA DRIVE			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2021"/>
City GREENWOOD	State IN	Zip Code 46143	Transaction ID : A-19203
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) PLACE		Occupation (for Individual) YUP	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 188 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KLASSEN, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 964 SANTA ANA DRIVE
 City GREENWOOD State IN Zip Code 46143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLACE Occupation (for Individual) YUP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2021
Transaction ID : A-19202
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. KLASSEN, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 964 SANTA ANA DRIVE
 City GREENWOOD State IN Zip Code 46143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLACE Occupation (for Individual) YUP
 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
 12 / 04 / 2021
Transaction ID : A-19201
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. KLEFFMAN, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MILLARD STREET
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCENTURE Occupation (for Individual) IT CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2021
Transaction ID : A-19216
 Amount of Each Receipt this Period 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 OF 525
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KLEFFMAN, NATHAN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2021
Mailing Address 43 MILLARD STREET		Transaction ID : A-19215
City COUNCIL BLUFFS	State IA	Zip Code 51503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer (for Individual) ACCENTURE	Occupation (for Individual) IT CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KLEFFMAN, NATHAN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2021
Mailing Address 43 MILLARD STREET		Transaction ID : A-19214
City COUNCIL BLUFFS	State IA	Zip Code 51503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer (for Individual) ACCENTURE	Occupation (for Individual) IT CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KLEFFMAN, NATHAN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2021
Mailing Address 43 MILLARD STREET		Transaction ID : A-19213
City COUNCIL BLUFFS	State IA	Zip Code 51503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer (for Individual) ACCENTURE	Occupation (for Individual) IT CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 475.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 190 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KLEINSCHMIDT, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25486 KLEINSCHMIDT RD
 City ELBERTA State AL Zip Code 36530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KLEINSCHMIDT TURF FARM Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 04 / 2021
Transaction ID : A-19220
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KLEINSCHMIDT, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25486 KLEINSCHMIDT RD
 City ELBERTA State AL Zip Code 36530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KLEINSCHMIDT TURF FARM Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 04 / 2021
Transaction ID : A-19219
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KNYSZ, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22789 COUNTRY CLUB DRIVE
 City LYON TWP State MI Zip Code 48178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) WHOLESALE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 28 / 2021
Transaction ID : A-19244
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 191 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KNYSZ, JASON, , ,

Mailing Address 22789 COUNTRY CLUB DRIVE

City LYON TWP State MI Zip Code 48178

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2021

Transaction ID : A-19243

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 22789 COUNTRY CLUB DRIVE

City LYON TWP State MI Zip Code 48178

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 28 / 2021

Transaction ID : A-19242

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 22789 COUNTRY CLUB DRIVE

City LYON TWP State MI Zip Code 48178

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2021

Transaction ID : A-19241

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KRAHLING, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5637 TESSIE COURT
 City NEW MARKET State MD Zip Code 21774
 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 ▼ 225.00

Date of Receipt 09 / 22 / 2021
Transaction ID : A-19277
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KRAHLING, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5637 TESSIE COURT
 City NEW MARKET State MD Zip Code 21774
 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 10 / 22 / 2021
Transaction ID : A-19276
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KRAHLING, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5637 TESSIE COURT
 City NEW MARKET State MD Zip Code 21774
 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 ▼ 275.00

Date of Receipt 11 / 22 / 2021
Transaction ID : A-19275
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 193 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. KRAHLING, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5637 TESSIE COURT
 City NEW MARKET State MD Zip Code 21774
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2021
Transaction ID : A-19274
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. KRCH, LIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17857 2ND STREET
 City TALL TIMBERS State MD Zip Code 20690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DYNCORP Occupation (for Individual) MECHANIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2021
Transaction ID : A-19280
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. KULA, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 863 VERMONT ST.
 City OAKLAND State CA Zip Code 94610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST. PAUL'S EPISCOPAL CHURCH Occupation (for Individual) MUSIC DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2021
Transaction ID : A-19301
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 194 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KULA, CHRISTOPHER, , ,

Mailing Address 863 VERMONT ST.

City OAKLAND	State CA	Zip Code 94610
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ST. PAUL'S EPISCOPAL CHURCH	Occupation (for Individual) MUSIC DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

Transaction ID : A-19300

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 863 VERMONT ST.

City OAKLAND	State CA	Zip Code 94610
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ST. PAUL'S EPISCOPAL CHURCH	Occupation (for Individual) MUSIC DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2021

Transaction ID : A-19299

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 863 VERMONT ST.

City OAKLAND	State CA	Zip Code 94610
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ST. PAUL'S EPISCOPAL CHURCH	Occupation (for Individual) MUSIC DIRECTOR
--	---

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
12		20		2021

Transaction ID : A-19298

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 525
	<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. LACHOWSKY, ZACH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 EAST HILL DRIVE
 City CONWAY State AR Zip Code 72032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CREEK ENTERPRISE Occupation (for Individual) PLANNING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2021
Transaction ID : A-19349
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LACHOWSKY, ZACH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 EAST HILL DRIVE
 City CONWAY State AR Zip Code 72032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CREEK ENTERPRISE Occupation (for Individual) PLANNING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2021
Transaction ID : A-19348
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LACHOWSKY, ZACH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 EAST HILL DRIVE
 City CONWAY State AR Zip Code 72032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CREEK ENTERPRISE Occupation (for Individual) PLANNING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2021
Transaction ID : A-19347
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 525
	<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. LACHOWSKY, ZACH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 EAST HILL DRIVE
 City CONWAY State AR Zip Code 72032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CREEK ENTERPRISE Occupation (for Individual) PLANNING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.70

Date of Receipt **10 / 22 / 2021**
Transaction ID : A-19346
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAM, ARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8538 WEST 62ND PLACE
 City ARVADA State CO Zip Code 80004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMI WELLNESS Occupation (for Individual) RN CASE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.60

Date of Receipt **07 / 19 / 2021**
Transaction ID : A-19365
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. LAM, ARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8538 WEST 62ND PLACE
 City ARVADA State CO Zip Code 80004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMI WELLNESS Occupation (for Individual) RN CASE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.60

Date of Receipt **08 / 19 / 2021**
Transaction ID : A-19364
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LAM, ARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8538 WEST 62ND PLACE

City ARVADA	State CO	Zip Code 80004
----------------	-------------	-------------------

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

Name of Employer (for Individual) AMI WELLNESS	Occupation (for Individual) RN CASE MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
244.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2021

Transaction ID : A-19363

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 8538 WEST 62ND PLACE

City ARVADA	State CO	Zip Code 80004
----------------	-------------	-------------------

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

Name of Employer (for Individual) AMI WELLNESS	Occupation (for Individual) RN CASE MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2021

Transaction ID : A-19362

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 11711 S ZEPHYR WAY

City SOUTH JORDAN	State UT	Zip Code 84009
----------------------	-------------	-------------------

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

Name of Employer (for Individual) PDS, INC	Occupation (for Individual) SENIOR QA ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2021

Transaction ID : A-19385

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LAMMI, PHILLIP, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11711 S ZEPHYR WAY
 City SOUTH JORDAN State UT Zip Code 84009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PDS, INC Occupation (for Individual) SENIOR QA ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2021
Transaction ID : A-19384
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAMMI, PHILLIP, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11711 S ZEPHYR WAY
 City SOUTH JORDAN State UT Zip Code 84009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PDS, INC Occupation (for Individual) SENIOR QA ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 20 / 2021
Transaction ID : A-19383
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LAMMI, PHILLIP, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11711 S ZEPHYR WAY
 City SOUTH JORDAN State UT Zip Code 84009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PDS, INC Occupation (for Individual) SENIOR QA ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 20 / 2021
Transaction ID : A-19382
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 199 OF 525
(check only one)

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

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LANCASTER, COLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 631 BURGESS HILL PASS

City WESTFIELD	State IN	Zip Code 46074
-------------------	-------------	-------------------

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

Name of Employer (for Individual) MIDCONTINENT INDEPENDENT SYSTEM OPERAT	Occupation (for Individual) SYSTEM OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2021

Transaction ID : A-19395

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 631 BURGESS HILL PASS

City WESTFIELD	State IN	Zip Code 46074
-------------------	-------------	-------------------

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

Name of Employer (for Individual) MIDCONTINENT INDEPENDENT SYSTEM OPERAT	Occupation (for Individual) SYSTEM OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2021

Transaction ID : A-19394

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 201 CENTURION LN

City MOUNT HOLLY	State NC	Zip Code 28120
---------------------	-------------	-------------------

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

Name of Employer (for Individual) JLS PUBLISHING LLC	Occupation (for Individual) SELF
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2021

Transaction ID : A-19418

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 200 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LASATER, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 CENTURION LN
 City MOUNT HOLLY State NC Zip Code 28120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JLS PUBLISHING LLC Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 19 / 2021
Transaction ID : A-19417
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. LASATER, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 CENTURION LN
 City MOUNT HOLLY State NC Zip Code 28120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JLS PUBLISHING LLC Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 04 / 2021
Transaction ID : A-19416
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. LAWVER, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 4TH AVE N
 City ONALASKA State WI Zip Code 54650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LA CROSSE CITY BREWERY Occupation (for Individual) OPERATIONS SUPERVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 15 / 2021
Transaction ID : A-19439
 Amount of Each Receipt this Period 75.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 201 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LAWVER, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 4TH AVE N
 City ONALASKA State WI Zip Code 54650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LA CROSSE CITY BREWERY Occupation (for Individual) OPERATIONS SUPERVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 15 / 2021
Transaction ID : A-19438
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. LAWVER, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 4TH AVE N
 City ONALASKA State WI Zip Code 54650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LA CROSSE CITY BREWERY Occupation (for Individual) OPERATIONS SUPERVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2021
Transaction ID : A-19437
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. LAWVER, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 4TH AVE N
 City ONALASKA State WI Zip Code 54650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LA CROSSE CITY BREWERY Occupation (for Individual) OPERATIONS SUPERVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 15 / 2021
Transaction ID : A-19436
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 202 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LAWVER, ZACHARY, , ,

Mailing Address 113 4TH AVE N

City ONALASKA	State WI	Zip Code 54650
------------------	-------------	-------------------

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

Name of Employer (for Individual) LA CROSSE CITY BREWERY	Occupation (for Individual) OPERATIONS SUPERVISOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2021

Transaction ID : A-19435

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 113 4TH AVE N

City ONALASKA	State WI	Zip Code 54650
------------------	-------------	-------------------

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

Name of Employer (for Individual) LA CROSSE CITY BREWERY	Occupation (for Individual) OPERATIONS SUPERVISOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2021

Transaction ID : A-19434

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 777 BRICKELL AVE STE 500
10513

City MIAMI	State FL	Zip Code 33131
---------------	-------------	-------------------

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

Name of Employer (for Individual) ATLAS AIR	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2021

Transaction ID : A-19460

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 OF 525
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LEHTIO, ANTHONY, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2021
Mailing Address 777 BRICKELL AVE STE 500 10513		Transaction ID : A-19459
City MIAMI	State FL	Zip Code 33131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) ATLAS AIR	Occupation (for Individual) PILOT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LEHTIO, ANTHONY, , ,		Date of Receipt MM / DD / YYYY 10 / 15 / 2021
Mailing Address 777 BRICKELL AVE STE 500 10513		Transaction ID : A-19458
City MIAMI	State FL	Zip Code 33131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) ATLAS AIR	Occupation (for Individual) PILOT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LEHTIO, ANTHONY, , ,		Date of Receipt MM / DD / YYYY 11 / 15 / 2021
Mailing Address 777 BRICKELL AVE STE 500 10513		Transaction ID : A-19457
City MIAMI	State FL	Zip Code 33131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) ATLAS AIR	Occupation (for Individual) PILOT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 285.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 204 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LEHTIO, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 BRICKELL AVE STE 500
 10513
 City MIAMI State FL Zip Code 33131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLAS AIR Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt **12 / 15 / 2021**
Transaction ID : A-19456
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL RESEARCH AND MANAGEMENT COMPAN Occupation (for Individual) SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 09 / 2021**
Transaction ID : A-19489
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL RESEARCH AND MANAGEMENT COMPAN Occupation (for Individual) SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 09 / 2021**
Transaction ID : A-19488
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 205 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAPITAL RESEARCH AND MANAGEMENT COMPAN SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 08 / 25 / 2021
Transaction ID : A-19487
 Amount of Each Receipt this Period 75.00
 Memo Item
 CONTRIBUTION

B. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAPITAL RESEARCH AND MANAGEMENT COMPAN SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 09 / 23 / 2021
Transaction ID : A-19486
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAPITAL RESEARCH AND MANAGEMENT COMPAN SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 09 / 25 / 2021
Transaction ID : A-19485
 Amount of Each Receipt this Period 75.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 206 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL RESEARCH AND MANAGEMENT COMPAN Occupation (for Individual) SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 09 / 2021
Transaction ID : A-19484
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL RESEARCH AND MANAGEMENT COMPAN Occupation (for Individual) SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 25 / 2021
Transaction ID : A-19483
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL RESEARCH AND MANAGEMENT COMPAN Occupation (for Individual) SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 09 / 2021
Transaction ID : A-19482
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL RESEARCH AND MANAGEMENT COMPAN Occupation (for Individual) SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 25 / 2021
Transaction ID : A-19481
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL RESEARCH AND MANAGEMENT COMPAN Occupation (for Individual) SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 12 / 09 / 2021
Transaction ID : A-19480
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEMLEY, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4927 TOWERS ST
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL RESEARCH AND MANAGEMENT COMPAN Occupation (for Individual) SR COMPLIANCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 12 / 25 / 2021
Transaction ID : A-19479
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LEPORE, AMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 299 NORTH BAYBERRY PARKWAY

City MIDDLETOWN	State DE	Zip Code 19709
--------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2021

Transaction ID : A-19501

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

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

Mailing Address 27 WEST 96TH STREET APT 9A

City NEW YORK	State NY	Zip Code 10025
------------------	-------------	-------------------

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

Name of Employer (for Individual) PHAROS ENTERPRISE INTELLIGENCE, LLC	Occupation (for Individual) ENERGY CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2021

Transaction ID : A-19540

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 27 WEST 96TH STREET APT 9A

City NEW YORK	State NY	Zip Code 10025
------------------	-------------	-------------------

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

Name of Employer (for Individual) PHAROS ENTERPRISE INTELLIGENCE, LLC	Occupation (for Individual) ENERGY CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2021

Transaction ID : A-19539

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	215.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 209 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LIGGIO, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 WEST 96TH STREET APT 9A

City NEW YORK	State NY	Zip Code 10025
------------------	-------------	-------------------

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

Name of Employer (for Individual) PHAROS ENTERPRISE INTELLIGENCE, LLC	Occupation (for Individual) ENERGY CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2021

Transaction ID : A-19538

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 27 WEST 96TH STREET APT 9A

City NEW YORK	State NY	Zip Code 10025
------------------	-------------	-------------------

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

Name of Employer (for Individual) PHAROS ENTERPRISE INTELLIGENCE, LLC	Occupation (for Individual) ENERGY CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2021

Transaction ID : A-19537

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 27 WEST 96TH STREET APT 9A

City NEW YORK	State NY	Zip Code 10025
------------------	-------------	-------------------

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

Name of Employer (for Individual) PHAROS ENTERPRISE INTELLIGENCE, LLC	Occupation (for Individual) ENERGY CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2021

Transaction ID : A-19536

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 210 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LIGGIO, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 WEST 96TH STREET APT 9A
 City NEW YORK State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHAROS ENTERPRISE INTELLIGENCE, LLC Occupation (for Individual) ENERGY CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 860.00

Date of Receipt **12 / 28 / 2021**
Transaction ID : A-19535
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LINDBORG, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1357 BRIDGEFORD DRIVE NORTHWEST
 City CONCORD State NC Zip Code 28027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JELD-WEN Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 23 / 2021**
Transaction ID : A-19553
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LINDBORG, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1357 BRIDGEFORD DRIVE NORTHWEST
 City CONCORD State NC Zip Code 28027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JELD-WEN Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 23 / 2021**
Transaction ID : A-19552
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 211 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LINDBORG, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1357 BRIDGEFORD DRIVE NORTHWEST
 City CONCORD State NC Zip Code 28027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JELD-WEN Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 23 / 2021**
Transaction ID : A-19551
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LINDBORG, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1357 BRIDGEFORD DRIVE NORTHWEST
 City CONCORD State NC Zip Code 28027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JELD-WEN Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 23 / 2021**
Transaction ID : A-19550
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LINDBORG, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1357 BRIDGEFORD DRIVE NORTHWEST
 City CONCORD State NC Zip Code 28027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JELD-WEN Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 23 / 2021**
Transaction ID : A-19549
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LINDBORG, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1357 BRIDGEFORD DRIVE NORTHWEST
 City CONCORD State NC Zip Code 28027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JELD-WEN Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 12 / 23 / 2021
Transaction ID : A-19548
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LINDSEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10200 BRADIE WAY
 City OSCEOLA State IN Zip Code 46561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 329.00

Date of Receipt 07 / 09 / 2021
Transaction ID : A-19567
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LOESBY, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 N YARMOUTH PL
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLAYER FIRST GAMES, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2021
Transaction ID : A-19598
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LOESBY, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 N YARMOUTH PL
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLAYER FIRST GAMES, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 06 / 2021
Transaction ID : A-19597
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LOESBY, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 N YARMOUTH PL
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLAYER FIRST GAMES, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 06 / 2021
Transaction ID : A-19596
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LOESBY, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 N YARMOUTH PL
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLAYER FIRST GAMES, INC. Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 06 / 2021
Transaction ID : A-19595
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 214 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LOGAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MAIN STREET
 City CONNOQUENESSING State PA Zip Code 16027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTINGHOUSE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 24 / 2021
Transaction ID : A-19603
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LOGAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MAIN STREET
 City CONNOQUENESSING State PA Zip Code 16027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTINGHOUSE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2021
Transaction ID : A-19602
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LOGAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MAIN STREET
 City CONNOQUENESSING State PA Zip Code 16027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTINGHOUSE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2021
Transaction ID : A-19601
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 215 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LOGAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MAIN STREET
 City CONNOQUENESSING State PA Zip Code 16027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTINGHOUSE Occupation (for Individual) ENGINEER
 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
 11 / 24 / 2021
Transaction ID : A-19600
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. LOGAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MAIN STREET
 City CONNOQUENESSING State PA Zip Code 16027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTINGHOUSE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2021
Transaction ID : A-19599
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. LORENZINI, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6617 DUNSDIN DRIVE
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2021
Transaction ID : A-19633
 Amount of Each Receipt this Period 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 525
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LORENZINI, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6617 DUNSDIN DRIVE
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 09 / 2021**
Transaction ID : A-19632
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. MAILLY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 POND ROAD
 City MONT VERNON State NH Zip Code 03057-1414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENVISION Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 23 / 2021**
Transaction ID : A-19741
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAILLY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 POND ROAD
 City MONT VERNON State NH Zip Code 03057-1414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENVISION Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 23 / 2021**
Transaction ID : A-19740
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MAILLY, DOUGLAS, , ,

Mailing Address 15 POND ROAD

City MONT VERNON	State NH	Zip Code 03057-1414
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ENVISION	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2021

Transaction ID : A-19739

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 15 POND ROAD

City MONT VERNON	State NH	Zip Code 03057-1414
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ENVISION	Occupation (for Individual) PHYSICIAN
---	--

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
12	/	23	/	2021

Transaction ID : A-19738

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 141 SCHUYLKILL AVE

City SHENANDOAH	State PA	Zip Code 17976-1338
--------------------	-------------	------------------------

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

Name of Employer (for Individual) A. DUIE PYLE	Occupation (for Individual) DISPATCHER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2021

Transaction ID : A-19762

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MANKIEWICZ, MITCHELL, , ,

Mailing Address 141 SCHUYLKILL AVE

City SHENANDOAH	State PA	Zip Code 17976-1338
--------------------	-------------	------------------------

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

Name of Employer (for Individual) A. DUIE PYLE	Occupation (for Individual) DISPATCHER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2021

Transaction ID : A-19761

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

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

Mailing Address 141 SCHUYLKILL AVE

City SHENANDOAH	State PA	Zip Code 17976-1338
--------------------	-------------	------------------------

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

Name of Employer (for Individual) A. DUIE PYLE	Occupation (for Individual) DISPATCHER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2021

Transaction ID : A-19760

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

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

Mailing Address 141 SCHUYLKILL AVE

City SHENANDOAH	State PA	Zip Code 17976-1338
--------------------	-------------	------------------------

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

Name of Employer (for Individual) A. DUIE PYLE	Occupation (for Individual) DISPATCHER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2021

Transaction ID : A-19759

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MANKIEWICZ, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 SCHUYLKILL AVE
 City SHENANDOAH State PA Zip Code 17976-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 A. DUIE PYLE DISPATCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2021
Transaction ID : A-19758
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. MARTIN, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7130 149TH AVE NE
 City REDMOND State WA Zip Code 98052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GOOGLE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2021
Transaction ID : A-19800
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

C. MCCONNELL, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 NEWPORT HALL LANE
 City COLUMBIA State SC Zip Code 29209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PRSIMAHEALTH RADIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2021
Transaction ID : A-19915
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 OF 525
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MCCONNELL, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 NEWPORT HALL LANE

City COLUMBIA	State SC	Zip Code 29209
------------------	-------------	-------------------

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

Name of Employer (for Individual) PRSIMAHEALTH	Occupation (for Individual) RADIOLOGIST
---	--

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
09		29		2021

Transaction ID : A-19914

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 118 NEWPORT HALL LANE

City COLUMBIA	State SC	Zip Code 29209
------------------	-------------	-------------------

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

Name of Employer (for Individual) PRSIMAHEALTH	Occupation (for Individual) RADIOLOGIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2021

Transaction ID : A-19913

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 118 NEWPORT HALL LANE

City COLUMBIA	State SC	Zip Code 29209
------------------	-------------	-------------------

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

Name of Employer (for Individual) PRSIMAHEALTH	Occupation (for Individual) RADIOLOGIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2021

Transaction ID : A-19912

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MCCONNELL, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 NEWPORT HALL LANE
 City COLUMBIA State SC Zip Code 29209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRSIMAHEALTH Occupation (for Individual) RADIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 29 / 2021
Transaction ID : A-19911
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCGILL, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6215 ERIC DRIVE
 City FLOYDS KNOBS State IN Zip Code 47119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPIRE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 09 / 2021
Transaction ID : A-19965
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCGILL, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6215 ERIC DRIVE
 City FLOYDS KNOBS State IN Zip Code 47119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPIRE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 09 / 2021
Transaction ID : A-19964
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 222 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MCGILL, MITCHELL, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2021
Mailing Address 6215 ERIC DRIVE		Transaction ID : A-19963
City FLOYDS KNOBS	State IN	Zip Code 47119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) ASPIRE	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCLOUD, KEN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2021
Mailing Address 299 CROSS RD		Transaction ID : A-20006
City GOSHEN	State NH	Zip Code 03752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) LACONIC	Occupation (for Individual) TECHNOLOGY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCLOUD, KEN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2021
Mailing Address 299 CROSS RD		Transaction ID : A-20005
City GOSHEN	State NH	Zip Code 03752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) LACONIC	Occupation (for Individual) TECHNOLOGY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 223 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. M CLOUD, KEN, , ,

Mailing Address 299 CROSS RD

City GOSHEN State NH Zip Code 03752

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2021

Transaction ID : A-20004

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 12906 NE 100TH STREET
NA

City KIRKLAND State WA Zip Code 98033

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

Name of Employer (for Individual) MICROSOFT Occupation (for Individual) PROGRAM 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
 10 / 26 / 2021

Transaction ID : A-20048

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 12906 NE 100TH STREET
NA

City KIRKLAND State WA Zip Code 98033

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

Name of Employer (for Individual) MICROSOFT Occupation (for Individual) PROGRAM MANAGER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2021

Transaction ID : A-20047

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MEEHAN, DAVID, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2021
Mailing Address 12906 NE 100TH STREET NA		Transaction ID : A-20046
City KIRKLAND	State WA	Zip Code 98033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) MICROSOFT	Occupation (for Individual) PROGRAM MANAGER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MEISE, COLBY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2021
Mailing Address 3003 MEADOWBROOK DR		Transaction ID : A-20065
City MIDLAND	State TX	Zip Code 79705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) PARALLEL PETROLEUM	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MEISE, COLBY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2021
Mailing Address 3003 MEADOWBROOK DR		Transaction ID : A-20064
City MIDLAND	State TX	Zip Code 79705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) PARALLEL PETROLEUM	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 225 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MEISE, COLBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 MEADOWBROOK DR
 City MIDLAND State TX Zip Code 79705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARALLEL PETROLEUM Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 22 / 2021
Transaction ID : A-20063
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. MEISE, COLBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 MEADOWBROOK DR
 City MIDLAND State TX Zip Code 79705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARALLEL PETROLEUM Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 12 / 22 / 2021
Transaction ID : A-20062
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 332.76

Date of Receipt
 07 / 13 / 2021
Transaction ID : A-20073
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 226 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.76

Date of Receipt **07 / 20 / 2021**
Transaction ID : A-20085
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 363.22

Date of Receipt **07 / 24 / 2021**
Transaction ID : A-20084
 Amount of Each Receipt this Period 5.46
 Memo Item CONTRIBUTION

C. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 388.22

Date of Receipt **08 / 13 / 2021**
Transaction ID : A-20072
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.46
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 227 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 413.22

Date of Receipt 08 / 20 / 2021
Transaction ID : A-20083
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.68

Date of Receipt 08 / 24 / 2021
Transaction ID : A-20082
 Amount of Each Receipt this Period 5.46
 Memo Item
 CONTRIBUTION

C. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.68

Date of Receipt 09 / 13 / 2021
Transaction ID : A-20071
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 55.46
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 228 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.68

Date of Receipt 09 / 20 / 2021
Transaction ID : A-20081
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 474.14

Date of Receipt 09 / 24 / 2021
Transaction ID : A-20080
 Amount of Each Receipt this Period 5.46
 Memo Item
 CONTRIBUTION

C. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.14

Date of Receipt 10 / 13 / 2021
Transaction ID : A-20070
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.46
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 229 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MELCHIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11573 STIVALI STREET

City LAS VEGAS	State NV	Zip Code 89183
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PINECREST INSPIRADA	Occupation (for Individual) DIGITAL COACH
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
524.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

Transaction ID : A-20079

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 11573 STIVALI STREET

City LAS VEGAS	State NV	Zip Code 89183
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PINECREST INSPIRADA	Occupation (for Individual) DIGITAL COACH
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
529.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2021

Transaction ID : A-20078

Amount of Each Receipt this Period
5.46

Memo Item
CONTRIBUTION

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

Mailing Address 11573 STIVALI STREET

City LAS VEGAS	State NV	Zip Code 89183
-------------------	-------------	-------------------

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

Name of Employer (for Individual) PINECREST INSPIRADA	Occupation (for Individual) DIGITAL COACH
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
554.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2021

Transaction ID : A-20069

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	55.46
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 230 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 579.60

Date of Receipt 11 / 20 / 2021
Transaction ID : A-20077
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.06

Date of Receipt 11 / 24 / 2021
Transaction ID : A-20076
 Amount of Each Receipt this Period 5.46
 Memo Item CONTRIBUTION

C. MELCHIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 STIVALI STREET
 City LAS VEGAS State NV Zip Code 89183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINECREST INSPIRADA Occupation (for Individual) DIGITAL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.06

Date of Receipt 12 / 13 / 2021
Transaction ID : A-20068
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.46
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MELCHIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11573 STIVALI STREET

City LAS VEGAS	State NV	Zip Code 89183
-------------------	-------------	-------------------

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

Name of Employer (for Individual) PINECREST INSPIRADA	Occupation (for Individual) DIGITAL COACH
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2021

Transaction ID : A-20075

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 11573 STIVALI STREET

City LAS VEGAS	State NV	Zip Code 89183
-------------------	-------------	-------------------

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

Name of Employer (for Individual) PINECREST INSPIRADA	Occupation (for Individual) DIGITAL COACH
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2021

Transaction ID : A-20074

Amount of Each Receipt this Period
5.46

Memo Item
CONTRIBUTION

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

Mailing Address 30 FOULKES LANE
APT 34

City CHESTERFIELD	State NJ	Zip Code 08515
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NA	Occupation (for Individual) GTFO
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
213.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		25		2021

Transaction ID : A-20091

Amount of Each Receipt this Period
17.76

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	48.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. MILLER, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 EAST 97 STREET
 City KANSAS CITY State MO Zip Code 64114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) LETTER CARRIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2021
Transaction ID : A-20156
 Amount of Each Receipt this Period 20.00
 Memo Item
 CONTRIBUTION

B. MILLER, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 EAST 97 STREET
 City KANSAS CITY State MO Zip Code 64114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) LETTER CARRIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2021
Transaction ID : A-20155
 Amount of Each Receipt this Period 20.00
 Memo Item
 CONTRIBUTION

C. MILLER, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 EAST 97 STREET
 City KANSAS CITY State MO Zip Code 64114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) LETTER CARRIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2021
Transaction ID : A-20154
 Amount of Each Receipt this Period 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 525
	<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. MILLER, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 221 EAST 97 STREET

City KANSAS CITY	State MO	Zip Code 64114
---------------------	-------------	-------------------

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

Name of Employer (for Individual) USPS	Occupation (for Individual) LETTER CARRIER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2021

Transaction ID : A-20153

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

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

Mailing Address 38131 JOHN P ST

City CLINTON TOWNSHIP	State MI	Zip Code 48036
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) IONBOND	Occupation (for Individual) SHIPPING & RECEIVING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
342.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	18	/	2021

Transaction ID : A-20178

Amount of Each Receipt this Period
9.37

Memo Item
CONTRIBUTION

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

Mailing Address 38131 JOHN P ST

City CLINTON TOWNSHIP	State MI	Zip Code 48036
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) IONBOND	Occupation (for Individual) SHIPPING & RECEIVING
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
351.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2021

Transaction ID : A-20177

Amount of Each Receipt this Period
9.37

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	38.74
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. MIRANOV, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38131 JOHN P ST
 City CLINTON TOWNSHIP State MI Zip Code 48036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IONBOND Occupation (for Individual) SHIPPING & RECEIVING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.33

Date of Receipt 09 / 18 / 2021
Transaction ID : A-20176
 Amount of Each Receipt this Period 9.37
 Memo Item CONTRIBUTION

B. MIRANOV, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38131 JOHN P ST
 City CLINTON TOWNSHIP State MI Zip Code 48036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IONBOND Occupation (for Individual) SHIPPING & RECEIVING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.70

Date of Receipt 10 / 18 / 2021
Transaction ID : A-20175
 Amount of Each Receipt this Period 9.37
 Memo Item CONTRIBUTION

C. MIRANOV, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38131 JOHN P ST
 City CLINTON TOWNSHIP State MI Zip Code 48036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IONBOND Occupation (for Individual) SHIPPING & RECEIVING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.07

Date of Receipt 11 / 18 / 2021
Transaction ID : A-20174
 Amount of Each Receipt this Period 9.37
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	28.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 235 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MITCHELL, JUSTICO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NEELY AVE
 City SPARTANBURG State SC Zip Code 29302-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED - EMERGING COMMUNICATION Occupation (for Individual) BUSINESS OWNER/MANAGER - NET
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.10

Date of Receipt **07 / 13 / 2021**
Transaction ID : A-20202
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. MITCHELL, JUSTICO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NEELY AVE
 City SPARTANBURG State SC Zip Code 29302-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED - EMERGING COMMUNICATION Occupation (for Individual) BUSINESS OWNER/MANAGER - NET
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 370.10

Date of Receipt **08 / 12 / 2021**
Transaction ID : A-20201
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. MITCHELL, JUSTICO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NEELY AVE
 City SPARTANBURG State SC Zip Code 29302-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED - EMERGING COMMUNICATION Occupation (for Individual) BUSINESS OWNER/MANAGER - NET
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.10

Date of Receipt **09 / 12 / 2021**
Transaction ID : A-20200
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MITCHELL, JUSTICO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 NEELY AVE

City SPARTANBURG	State SC	Zip Code 29302-4054
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED - EMERGING COMMUNICATION	Occupation (for Individual) BUSINESS OWNER/MANAGER - NET
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2021

Transaction ID : A-20199

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 107 NEELY AVE

City SPARTANBURG	State SC	Zip Code 29302-4054
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED - EMERGING COMMUNICATION	Occupation (for Individual) BUSINESS OWNER/MANAGER - NET
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2021

Transaction ID : A-20198

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

Mailing Address 107 NEELY AVE

City SPARTANBURG	State SC	Zip Code 29302-4054
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED - EMERGING COMMUNICATION	Occupation (for Individual) BUSINESS OWNER/MANAGER - NET
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
410.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2021

Transaction ID : A-20197

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 237 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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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
 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 ▼ 718.94

Date of Receipt **07 / 01 / 2021**
Transaction ID : A-20190
 Amount of Each Receipt this Period 51.80
 Memo Item CONTRIBUTION

B. 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
 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 ▼ 770.74

Date of Receipt **08 / 01 / 2021**
Transaction ID : A-20189
 Amount of Each Receipt this Period 51.80
 Memo Item CONTRIBUTION

C. 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
 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 ▼ 822.54

Date of Receipt **09 / 01 / 2021**
Transaction ID : A-20188
 Amount of Each Receipt this Period 51.80
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.40
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 238 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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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
 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 ▼ 874.34

Date of Receipt 10 / 01 / 2021
Transaction ID : A-20187
 Amount of Each Receipt this Period 51.80
 Memo Item CONTRIBUTION

B. 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
 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 ▼ 926.14

Date of Receipt 11 / 01 / 2021
Transaction ID : A-20186
 Amount of Each Receipt this Period 51.80
 Memo Item CONTRIBUTION

C. 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
 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 ▼ 976.14

Date of Receipt 12 / 06 / 2021
Transaction ID : A-20185
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 153.60
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 239 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MOBERG, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 WHITE ROCK PL
 City VASS State NC Zip Code 28394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORD Occupation (for Individual) AUTOMOTIVE TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 01 / 2021
Transaction ID : A-20223
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MOBERG, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 WHITE ROCK PL
 City VASS State NC Zip Code 28394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORD Occupation (for Individual) AUTOMOTIVE TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 01 / 2021
Transaction ID : A-20224
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MONDABAUGH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18547 ASHLEY AVE
 City TORRANCE State CA Zip Code 90504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M&M AIR CONDITIONING Occupation (for Individual) SERVICE TECH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 12 / 15 / 2021
Transaction ID : A-20266
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 240 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MORGAN, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27730 NORTHEAST 146TH WAY
 City DUVALL State WA Zip Code 98019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECH Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 454.80

Date of Receipt **07 / 13 / 2021**
Transaction ID : A-20324
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MORGAN, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27730 NORTHEAST 146TH WAY
 City DUVALL State WA Zip Code 98019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECH Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 479.80

Date of Receipt **09 / 16 / 2021**
Transaction ID : A-20323
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MORGAN, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27730 NORTHEAST 146TH WAY
 City DUVALL State WA Zip Code 98019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECH Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.80

Date of Receipt **10 / 16 / 2021**
Transaction ID : A-20322
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. MORGAN, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27730 NORTHEAST 146TH WAY
 City DUVALL State WA Zip Code 98019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECH Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 529.80

Date of Receipt
 11 / 16 / 2021
Transaction ID : A-20321
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MORGAN, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27730 NORTHEAST 146TH WAY
 City DUVALL State WA Zip Code 98019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECH Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 554.80

Date of Receipt
 12 / 16 / 2021
Transaction ID : A-20320
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MUENCH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1238 LIBERTY BELL DR
 City CHERRY HILL State NJ Zip Code 08003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIKMA PHARMACEUTICALS USA INC. Occupation (for Individual) FINANCE DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 05 / 2021
Transaction ID : A-20388
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MUENCH, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1238 LIBERTY BELL DR

City CHERRY HILL	State NJ	Zip Code 08003
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIKMA PHARMACEUTICALS USA INC.	Occupation (for Individual) FINANCE DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2021

Transaction ID : A-20387

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 1238 LIBERTY BELL DR

City CHERRY HILL	State NJ	Zip Code 08003
---------------------	-------------	-------------------

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

Name of Employer (for Individual) HIKMA PHARMACEUTICALS USA INC.	Occupation (for Individual) FINANCE DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2021

Transaction ID : A-20386

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 24 GEORGE ST
2

City MANCHESTER	State NH	Zip Code 03102
--------------------	-------------	-------------------

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

Name of Employer (for Individual) VERIZON MEDIA	Occupation (for Individual) MANAGER, SOFTWARE ENGINEERIN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2021

Transaction ID : A-20399

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 243 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MULLIN, MICKEY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2021
Mailing Address 24 GEORGE ST 2		Transaction ID : A-20398
City MANCHESTER	State NH	Zip Code 03102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) VERIZON MEDIA	Occupation (for Individual) MANAGER, SOFTWARE ENGINEERIN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NAVE, OFER, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2021
Mailing Address 4611 FIRE FLY CIRCLE 4611		Transaction ID : A-20484
City LAS VEGAS	State NV	Zip Code 89122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) SELF	Occupation (for Individual) DELIVERY DRIVER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. NEMCHENOK, JACOB, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 26 / 2021
Mailing Address 295 LYNN SHORE DRIVE 295 LYNN SHORE DRIVE 508		Transaction ID : A-20519
City LYNN	State MA	Zip Code 01902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) LOOMIS, SAYLES & CO.	Occupation (for Individual) BUSINESS ANALYST	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1550.00	

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. NEMCHENOK, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 LYNN SHORE DRIVE
 295 LYNN SHORE DRIVE 508
 City LYNN State MA Zip Code 01902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOMIS, SAYLES & CO. Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 08 / 07 / 2021
Transaction ID : A-20518
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NEMCHENOK, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 LYNN SHORE DRIVE
 295 LYNN SHORE DRIVE 508
 City LYNN State MA Zip Code 01902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOMIS, SAYLES & CO. Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 09 / 07 / 2021
Transaction ID : A-20517
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NEMCHENOK, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 LYNN SHORE DRIVE
 295 LYNN SHORE DRIVE 508
 City LYNN State MA Zip Code 01902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOMIS, SAYLES & CO. Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 10 / 07 / 2021
Transaction ID : A-20516
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. NEMCHENOK, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 LYNN SHORE DRIVE
 295 LYNN SHORE DRIVE 508
 City LYNN State MA Zip Code 01902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOMIS, SAYLES & CO. Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt **11 / 07 / 2021**
Transaction ID : A-20515
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NEMCHENOK, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 LYNN SHORE DRIVE
 295 LYNN SHORE DRIVE 508
 City LYNN State MA Zip Code 01902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOMIS, SAYLES & CO. Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt **12 / 07 / 2021**
Transaction ID : A-20514
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NEPOMUCENO, CONNOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 MAIN ST
 1
 City CLARKSTON State MI Zip Code 48346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GESTAMP Occupation (for Individual) TEST LAB TECHNICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **11 / 21 / 2021**
Transaction ID : A-20521
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 246 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. NEPOMUCENO, CONNOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 MAIN ST
 1
 City CLARKSTON State MI Zip Code 48346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GESTAMP Occupation (for Individual) TEST LAB TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 21 / 2021
Transaction ID : A-20520
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NOLIN, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2695 WILDFLOWER DRIVE
 City MIDDLEVILLE State MI Zip Code 49333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LOW VOLTAGE TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 03 / 2021
Transaction ID : A-20569
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NUNN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14620 SPRINGS EDGE DRIVE
 City AUSTIN State TX Zip Code 78717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KERSHNER TRADING GROUP Occupation (for Individual) OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 10 / 2021
Transaction ID : A-20599
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 247 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. NUNN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14620 SPRINGS EDGE DRIVE
 City AUSTIN State TX Zip Code 78717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KERSHNER TRADING GROUP Occupation (for Individual) OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 10 / 2021
Transaction ID : A-20598
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. NUNN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14620 SPRINGS EDGE DRIVE
 City AUSTIN State TX Zip Code 78717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KERSHNER TRADING GROUP Occupation (for Individual) OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 12 / 10 / 2021
Transaction ID : A-20597
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. ODERMATT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 FIRSON CIRCLE
 City PITTSBURGH State PA Zip Code 15241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS COMPANIES Occupation (for Individual) SENIOR PROJECT CONTROLS ANAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2021
Transaction ID : A-20616
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ODERMATT, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1110 FIRSON CIRCLE

City PITTSBURGH	State PA	Zip Code 15241
--------------------	-------------	-------------------

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

Name of Employer (for Individual) WILLIAMS COMPANIES	Occupation (for Individual) SENIOR PROJECT CONTROLS ANAL
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2021

Transaction ID : A-20615

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 1110 FIRSON CIRCLE

City PITTSBURGH	State PA	Zip Code 15241
--------------------	-------------	-------------------

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

Name of Employer (for Individual) WILLIAMS COMPANIES	Occupation (for Individual) SENIOR PROJECT CONTROLS ANAL
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2021

Transaction ID : A-20614

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 5831 U.S. 50

City CARSON CITY	State NV	Zip Code 89701
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ABC SUPPLY	Occupation (for Individual) BRANCH MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2021

Transaction ID : A-20645

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 249 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. OLLER, SPENCER, , ,

Mailing Address 5831 U.S. 50

City CARSON CITY State NV Zip Code 89701

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

Name of Employer (for Individual) ABC SUPPLY Occupation (for Individual) BRANCH MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2021

Transaction ID : **A-20644**

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 5831 U.S. 50

City CARSON CITY State NV Zip Code 89701

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

Name of Employer (for Individual) ABC SUPPLY Occupation (for Individual) BRANCH MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2021

Transaction ID : **A-20643**

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 5831 U.S. 50

City CARSON CITY State NV Zip Code 89701

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

Name of Employer (for Individual) ABC SUPPLY Occupation (for Individual) BRANCH MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2021

Transaction ID : **A-20642**

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. PATEL, MIRAGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5314 54TH STREET W
 City UNIVERSITY PLACE State WA Zip Code 98467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERAN AFFAIRS Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 23 / 2021
Transaction ID : A-20774
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PATEL, MIRAGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5314 54TH STREET W
 City UNIVERSITY PLACE State WA Zip Code 98467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERAN AFFAIRS Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2021
Transaction ID : A-20773
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PATEL, MIRAGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5314 54TH STREET W
 City UNIVERSITY PLACE State WA Zip Code 98467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERAN AFFAIRS Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 23 / 2021
Transaction ID : A-20772
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 251 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. PATEL, MIRAGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5314 54TH STREET W
 City UNIVERSITY PLACE State WA Zip Code 98467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERAN AFFAIRS Occupation (for Individual) PHARMACIST
 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
 12 / 23 / 2021
Transaction ID : A-20771
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. PEEBLES, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61133 MILSTEAD RD
 City ATMORE State AL Zip Code 36502
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2021
Transaction ID : A-20823
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. PEEBLES, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61133 MILSTEAD RD
 City ATMORE State AL Zip Code 36502
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2021
Transaction ID : A-20822
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 252 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PEEBLES, ANTHONY, , ,

Mailing Address 61133 MILSTEAD RD

City ATMORE	State AL	Zip Code 36502
----------------	-------------	-------------------

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 ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2021

Transaction ID : A-20821

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PEEBLES, ANTHONY, , ,

Mailing Address 61133 MILSTEAD RD

City ATMORE	State AL	Zip Code 36502
----------------	-------------	-------------------

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 ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2021

Transaction ID : A-20820

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. PENCE, ERIC, , ,

Mailing Address 633 ALLISON CIR
3

City BYRON	State IL	Zip Code 61010
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACKAGING COORDINATORS INC	Occupation (for Individual) INVENTORY CONTROL COORDINATC
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	04	/	2021

Transaction ID : A-20837

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PENCE, ERIC, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2021
Mailing Address 633 ALLISON CIR 3		Transaction ID : A-20833
City BYRON	State IL	Zip Code 61010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) PACKAGING COORDINATORS INC	Occupation (for Individual) INVENTORY CONTROL COORDINAT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PENCE, ERIC, , ,		Date of Receipt MM / DD / YYYY 12 / 04 / 2021
Mailing Address 633 ALLISON CIR 3		Transaction ID : A-20832
City BYRON	State IL	Zip Code 61010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) PACKAGING COORDINATORS INC	Occupation (for Individual) INVENTORY CONTROL COORDINAT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PENNINGTON, WILL, , ,		Date of Receipt MM / DD / YYYY 08 / 05 / 2021
Mailing Address 4644 GLENDALE ROAD		Transaction ID : A-20842
City KENLY	State NC	Zip Code 27542
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) MANHEIM	Occupation (for Individual) BODY TECH	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 211.05	

SUBTOTAL of Receipts This Page (optional).....	35.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 255 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PENNINGTON, WILL, , ,			Date of Receipt MM / DD / YYYY 09 / 05 / 2021
Mailing Address 4644 GLENDALE ROAD			Transaction ID : A-20841
City KENLY	State NC	Zip Code 27542	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MANHEIM		Occupation (for Individual) BODY TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.05		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PENNINGTON, WILL, , ,			Date of Receipt MM / DD / YYYY 10 / 05 / 2021
Mailing Address 4644 GLENDALE ROAD			Transaction ID : A-20840
City KENLY	State NC	Zip Code 27542	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MANHEIM		Occupation (for Individual) BODY TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.05		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PENNINGTON, WILL, , ,			Date of Receipt MM / DD / YYYY 11 / 05 / 2021
Mailing Address 4644 GLENDALE ROAD			Transaction ID : A-20839
City KENLY	State NC	Zip Code 27542	Amount of Each Receipt this Period 5.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MANHEIM		Occupation (for Individual) BODY TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 266.05		

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 256 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. PENNINGTON, WILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 GLENDALE ROAD
 City KENLY State NC Zip Code 27542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANHEIM Occupation (for Individual) BODY TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.05

Date of Receipt 12 / 05 / 2021
Transaction ID : A-20838
 Amount of Each Receipt this Period 5.00
 Memo Item
 CONTRIBUTION

B. PINTO, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 TANGLEWOOD AVENUE
 City CHARLESTON State SC Zip Code 29407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS AND HUTTON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 13 / 2021
Transaction ID : A-20915
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. PINTO, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 TANGLEWOOD AVENUE
 City CHARLESTON State SC Zip Code 29407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS AND HUTTON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 13 / 2021
Transaction ID : A-20914
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 257 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. PINTO, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 TANGLEWOOD AVENUE
 City CHARLESTON State SC Zip Code 29407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS AND HUTTON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **12 / 13 / 2021**
Transaction ID : A-20913
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. POHLER, CLINT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 HI CIR N UNIT A
 City HORSESHOE BAY State TX Zip Code 78657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUPA SOFTWARE, INC Occupation (for Individual) PRINCIPAL SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.50

Date of Receipt **07 / 17 / 2021**
Transaction ID : A-20970
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. POHLER, CLINT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 HI CIR N UNIT A
 City HORSESHOE BAY State TX Zip Code 78657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUPA SOFTWARE, INC Occupation (for Individual) PRINCIPAL SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.50

Date of Receipt **08 / 17 / 2021**
Transaction ID : A-20969
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 258 OF 525
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. POHLER, CLINT, , ,		Date of Receipt
Mailing Address 609 HI CIR N UNIT A		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2021"/>
City HORSESHOE BAY	State TX	Zip Code 78657
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-20968
Name of Employer (for Individual) COUPA SOFTWARE, INC		Occupation (for Individual) PRINCIPAL SOFTWARE ENGINEER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.50"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>
		<input type="checkbox"/> Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. POHLER, CLINT, , ,		Date of Receipt
Mailing Address 609 HI CIR N UNIT A		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2021"/>
City HORSESHOE BAY	State TX	Zip Code 78657
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-20967
Name of Employer (for Individual) COUPA SOFTWARE, INC		Occupation (for Individual) PRINCIPAL SOFTWARE ENGINEER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="475.50"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>
		<input type="checkbox"/> Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. POHLER, CLINT, , ,		Date of Receipt
Mailing Address 609 HI CIR N UNIT A		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2021"/>
City HORSESHOE BAY	State TX	Zip Code 78657
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A-20966
Name of Employer (for Individual) COUPA SOFTWARE, INC		Occupation (for Individual) PRINCIPAL SOFTWARE ENGINEER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="500.50"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>
		<input type="checkbox"/> Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. POHLER, CLINT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 HI CIR N UNIT A
 City HORSESHOE BAY State TX Zip Code 78657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUPA SOFTWARE, INC Occupation (for Individual) PRINCIPAL SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.50

Date of Receipt **12 / 17 / 2021**
Transaction ID : A-20965
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PROBBER, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 NORTHWEST 4TH DIAGONAL 101
 City BOCA RATON State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PM MARKETING Occupation (for Individual) MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.40

Date of Receipt **10 / 05 / 2021**
Transaction ID : A-21031
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PROBBER, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 NORTHWEST 4TH DIAGONAL 101
 City BOCA RATON State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PM MARKETING Occupation (for Individual) MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.40

Date of Receipt **11 / 05 / 2021**
Transaction ID : A-21030
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. PROBBER, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 NORTHWEST 4TH DIAGONAL
 101
 City BOCA RATON State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PM MARKETING Occupation (for Individual) MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.40

Date of Receipt **12 / 05 / 2021**
Transaction ID : A-21029
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RAFFERTY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 SOUTH SMITHVILLE ROAD
 APT 4
 City DAYTON State OH Zip Code 45420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF DAYTON Occupation (for Individual) STUDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **11 / 27 / 2021**
Transaction ID : A-21086
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAFFERTY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 SOUTH SMITHVILLE ROAD
 APT 4
 City DAYTON State OH Zip Code 45420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF DAYTON Occupation (for Individual) STUDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **12 / 27 / 2021**
Transaction ID : A-21085
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 261 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. RAVET, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 HIDDEN HILLS DRIVE
 City DRIPPING SPRINGS State TX Zip Code 78620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 23 / 2021
Transaction ID : A-21121
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RAVET, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 HIDDEN HILLS DRIVE
 City DRIPPING SPRINGS State TX Zip Code 78620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 07 / 2021
Transaction ID : A-21120
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RAVET, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 HIDDEN HILLS DRIVE
 City DRIPPING SPRINGS State TX Zip Code 78620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 23 / 2021
Transaction ID : A-21119
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 262 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. RAVET, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 HIDDEN HILLS DRIVE
 City DRIPPING SPRINGS State TX Zip Code 78620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 23 / 2021**
Transaction ID : A-21118
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RAVET, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 HIDDEN HILLS DRIVE
 City DRIPPING SPRINGS State TX Zip Code 78620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **12 / 23 / 2021**
Transaction ID : A-21117
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. REID, DYLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 RHODE ISLAND AVE N
 City BROOKLYN PARK State MN Zip Code 55428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE TESSMAN COMPANY Occupation (for Individual) OUTSIDE SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 17 / 2021**
Transaction ID : A-21190
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 263 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. REID, DYLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6300 RHODE ISLAND AVE N

City BROOKLYN PARK	State MN	Zip Code 55428
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE TESSMAN COMPANY	Occupation (for Individual) OUTSIDE SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2021

Transaction ID : A-21189

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. REID, DYLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6300 RHODE ISLAND AVE N

City BROOKLYN PARK	State MN	Zip Code 55428
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE TESSMAN COMPANY	Occupation (for Individual) OUTSIDE SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2021

Transaction ID : A-21188

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RICHARD, JOSH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 HIGH BRIDGE RD

City HUBBARDSTON	State MA	Zip Code 01452
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MYSELF	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
214.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2021

Transaction ID : A-21257

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 264 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. RICHARD, JOSH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 HIGH BRIDGE RD

City HUBBARDSTON	State MA	Zip Code 01452
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MYSELF	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2021

Transaction ID : A-21256

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RIDDLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65 HERBERT STREET

City ROCKY MOUNT	State VA	Zip Code 24151
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R+L	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2021

Transaction ID : A-21289

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. RIDDLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65 HERBERT STREET

City ROCKY MOUNT	State VA	Zip Code 24151
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R+L	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	02	/	2021

Transaction ID : A-21288

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RIDDLE, WILLIAM, , ,

Mailing Address 65 HERBERT STREET

City ROCKY MOUNT	State VA	Zip Code 24151
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R+L	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.00

Date of Receipt
MM / DD / YYYY
09 / 02 / 2021

Transaction ID : A-21287

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RIDDLE, WILLIAM, , ,

Mailing Address 65 HERBERT STREET

City ROCKY MOUNT	State VA	Zip Code 24151
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R+L	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.00

Date of Receipt
MM / DD / YYYY
10 / 02 / 2021

Transaction ID : A-21286

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RIDDLE, WILLIAM, , ,

Mailing Address 65 HERBERT STREET

City ROCKY MOUNT	State VA	Zip Code 24151
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R+L	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
418.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2021

Transaction ID : A-21285

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. RIDDLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65 HERBERT STREET

City ROCKY MOUNT	State VA	Zip Code 24151
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R+L	Occupation (for Individual) LOGISTICS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
448.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2021

Transaction ID : A-21284

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. RINK, JASON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3806 VALLEY VIEW

City ROUND ROCK	State TX	Zip Code 78681
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FILM PRODUCER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2021

Transaction ID : A-21306

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RINK, JASON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3806 VALLEY VIEW

City ROUND ROCK	State TX	Zip Code 78681
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FILM PRODUCER
--	--

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
12	/	20	/	2021

Transaction ID : A-21305

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROBERSON, JOHN DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 802 BANISTER LANE
 City AUSTIN State TX Zip Code 78704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME TAX GROUP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 19 / 2021
Transaction ID : A-21332
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROBERSON, JOHN DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 802 BANISTER LANE
 City AUSTIN State TX Zip Code 78704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME TAX GROUP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 19 / 2021
Transaction ID : A-21331
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROBERTS, JEPHREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17468 JOHNSONS MILL RD
 City SEDLEY State VA Zip Code 23878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWPORT NEWS SHIPBUILDING Occupation (for Individual) DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2021
Transaction ID : A-21341
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROBERTS, JEPHREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17468 JOHNSONS MILL RD
 City SEDLEY State VA Zip Code 23878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWPORT NEWS SHIPBUILDING Occupation (for Individual) DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 20 / 2021
Transaction ID : A-21340
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROBERTS, JEPHREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17468 JOHNSONS MILL RD
 City SEDLEY State VA Zip Code 23878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWPORT NEWS SHIPBUILDING Occupation (for Individual) DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 20 / 2021
Transaction ID : A-21339
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROBERTS, JEPHREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17468 JOHNSONS MILL RD
 City SEDLEY State VA Zip Code 23878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWPORT NEWS SHIPBUILDING Occupation (for Individual) DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2021
Transaction ID : A-21338
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 269 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROBERTS, JEPHREY, , ,

Mailing Address 17468 JOHNSONS MILL RD

City SEDLEY	State VA	Zip Code 23878
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEWPORT NEWS SHIPBUILDING	Occupation (for Individual) DESIGNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2021

Transaction ID : A-21337

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROBERTS, RYAN, , ,

Mailing Address 505 29TH STREET

City GLADSTONE	State MI	Zip Code 49837
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHM	Occupation (for Individual) REGISTERED NURSE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2021

Transaction ID : A-21353

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROBERTS, RYAN, , ,

Mailing Address 505 29TH STREET

City GLADSTONE	State MI	Zip Code 49837
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHM	Occupation (for Individual) REGISTERED NURSE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2021

Transaction ID : A-21352

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROBERTS, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 29TH STREET
 City GLADSTONE State MI Zip Code 49837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHM Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 25 / 2021
Transaction ID : A-21351
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROBERTS, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 29TH STREET
 City GLADSTONE State MI Zip Code 49837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHM Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 25 / 2021
Transaction ID : A-21350
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. ROBERTS, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 29TH STREET
 City GLADSTONE State MI Zip Code 49837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHM Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 25 / 2021
Transaction ID : A-21349
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 35.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 271 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROBERTS, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 29TH STREET
 City GLADSTONE State MI Zip Code 49837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHM Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 25 / 2021**
Transaction ID : A-21348
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. ROOS, HECTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 331274
 City MIAMI State FL Zip Code 33233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUMAN SCALE STRATEGIES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **11 / 16 / 2021**
Transaction ID : A-21425
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. ROOS, HECTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 331274
 City MIAMI State FL Zip Code 33233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUMAN SCALE STRATEGIES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt **11 / 28 / 2021**
Transaction ID : A-21419
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 760.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 272 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROOS, HECTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 331274

City MIAMI	State FL	Zip Code 33233
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUMAN SCALE STRATEGIES	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
810.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2021

Transaction ID : A-21418

Amount of Each Receipt this Period
810.00

Memo Item CONTRIBUTION

B. ROOS, HECTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 331274

City MIAMI	State FL	Zip Code 33233
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUMAN SCALE STRATEGIES	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
831.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2021

Transaction ID : A-21424

Amount of Each Receipt this Period
21.00

Memo Item CONTRIBUTION

C. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAF	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
730.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2021

Transaction ID : A-21443

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 273 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAF	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
740.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2021

Transaction ID : A-21442

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAF	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2021

Transaction ID : A-21441

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAF	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2021

Transaction ID : A-21440

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 525
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)
USAF Occupation (for Individual)
HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
860.00

Date of Receipt
10 / 18 / 2021
Transaction ID : A-21439

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)
USAF Occupation (for Individual)
HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
870.00

Date of Receipt
11 / 01 / 2021
Transaction ID : A-21438

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)
USAF Occupation (for Individual)
HR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
895.00

Date of Receipt
11 / 15 / 2021
Transaction ID : A-21437

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 275 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAF	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
915.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		01		2021

Transaction ID : A-21435

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. ROSS, JAKOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PSC 76 BOX 4244

City APO	State AP	Zip Code 96319
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAF	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
915.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		01		2021

Transaction ID : A-21436

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. ROTH, COLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 484 KING OF PRUSSIA ROAD

City WAYNE	State PA	Zip Code 19087
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COOK UNITY	Occupation (for Individual) HEAD OF PERFORMANCE MARKETIN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
219.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		23		2021

Transaction ID : A-21455

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 525
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROTH, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 484 KING OF PRUSSIA ROAD
 City WAYNE State PA Zip Code 19087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK UNITY Occupation (for Individual) HEAD OF PERFORMANCE MARKETIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.94

Date of Receipt 08 / 23 / 2021
Transaction ID : A-21454
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROTH, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 484 KING OF PRUSSIA ROAD
 City WAYNE State PA Zip Code 19087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK UNITY Occupation (for Individual) HEAD OF PERFORMANCE MARKETIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.94

Date of Receipt 09 / 23 / 2021
Transaction ID : A-21453
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROTH, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 484 KING OF PRUSSIA ROAD
 City WAYNE State PA Zip Code 19087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK UNITY Occupation (for Individual) HEAD OF PERFORMANCE MARKETIN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 294.94

Date of Receipt 10 / 23 / 2021
Transaction ID : A-21452
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 277 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROTH, COLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 484 KING OF PRUSSIA ROAD

City WAYNE State PA Zip Code 19087

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COOK UNITY Occupation (for Individual) HEAD OF PERFORMANCE MARKETIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 319.94

Date of Receipt 11 / 23 / 2021
Transaction ID : A-21451

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. ROTH, COLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 484 KING OF PRUSSIA ROAD

City WAYNE State PA Zip Code 19087

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COOK UNITY Occupation (for Individual) HEAD OF PERFORMANCE MARKETI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 344.94

Date of Receipt 12 / 23 / 2021
Transaction ID : A-21450

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. RUFO, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 OKLAHOMA DR

City JACKSON State NJ Zip Code 08527

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 20 / 2021
Transaction ID : A-21493

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RUFO, MICHAEL, , ,

Mailing Address 1 OKLAHOMA DR

City JACKSON State NJ Zip Code 08527

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2021

Transaction ID : A-21492

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RUFO, MICHAEL, , ,

Mailing Address 1 OKLAHOMA DR

City JACKSON State NJ Zip Code 08527

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2021

Transaction ID : A-21491

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RUFO, MICHAEL, , ,

Mailing Address 1 OKLAHOMA DR

City JACKSON State NJ Zip Code 08527

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT

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
 12 / 20 / 2021

Transaction ID : A-21490

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 279 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. RUMLAND, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43591 MINK MEADOWS ST.
 City CHANTILLY State VA Zip Code 20152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VMWARE Occupation (for Individual) SR SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.40

Date of Receipt **08 / 28 / 2021**
Transaction ID : A-21506
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RUMLAND, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43591 MINK MEADOWS ST.
 City CHANTILLY State VA Zip Code 20152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VMWARE Occupation (for Individual) SR SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.40

Date of Receipt **09 / 28 / 2021**
Transaction ID : A-21505
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUMLAND, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43591 MINK MEADOWS ST.
 City CHANTILLY State VA Zip Code 20152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VMWARE Occupation (for Individual) SR SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.40

Date of Receipt **10 / 28 / 2021**
Transaction ID : A-21504
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 280 OF 525
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. RUMLAND, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43591 MINK MEADOWS ST.

City CHANTILLY	State VA	Zip Code 20152
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VMWARE	Occupation (for Individual) SR SYSTEMS ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
296.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2021

Transaction ID : A-21503

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RUMLAND, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43591 MINK MEADOWS ST.

City CHANTILLY	State VA	Zip Code 20152
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VMWARE	Occupation (for Individual) SR SYSTEMS ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
321.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2021

Transaction ID : A-21502

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SABRIN, MURRAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1500 PALISADE AVE. APT. 2F

City FORT LEE	State NJ	Zip Code 07024
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAMAPO COLLEGE	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
362.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2021

Transaction ID : A-21550

Amount of Each Receipt this Period
51.80

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	101.80
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 281 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
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
------------------	-------------	-------------------

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 ▼
414.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2021

Transaction ID : A-21549

Amount of Each Receipt this Period
51.80

Memo Item
CONTRIBUTION

B. SABRIN, MURRAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1500 PALISADE AVE. APT. 2F

City FORT LEE	State NJ	Zip Code 07024
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAMAPO COLLEGE	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
466.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2021

Transaction ID : A-21548

Amount of Each Receipt this Period
51.80

Memo Item
CONTRIBUTION

C. SABRIN, MURRAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1500 PALISADE AVE. APT. 2F

City FORT LEE	State NJ	Zip Code 07024
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAMAPO COLLEGE	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
518.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2021

Transaction ID : A-21547

Amount of Each Receipt this Period
51.80

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 282 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
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
 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 ▼ 569.80

Date of Receipt 11 / 21 / 2021
Transaction ID : A-21546
 Amount of Each Receipt this Period 51.80
 Memo Item
 CONTRIBUTION

B. SABRIN, MURRAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 PALISADE AVE. APT. 2F
 City FORT LEE State NJ Zip Code 07024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAMAPO COLLEGE Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 621.60

Date of Receipt 12 / 21 / 2021
Transaction ID : A-21545
 Amount of Each Receipt this Period 51.80
 Memo Item
 CONTRIBUTION

C. SADLER, SHONE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6980 NORTHWEST 67TH COURT
 City PARKLAND State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADOBE SYSTEMS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 218.09

Date of Receipt 08 / 07 / 2021
Transaction ID : A-21555
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 128.60
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 OF 525
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SADLER, SHONE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6980 NORTHWEST 67TH COURT

City PARKLAND	State FL	Zip Code 33067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADOBE SYSTEMS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2021

Transaction ID : A-21554

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SADLER, SHONE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6980 NORTHWEST 67TH COURT

City PARKLAND	State FL	Zip Code 33067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADOBE SYSTEMS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2021

Transaction ID : A-21553

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SADLER, SHONE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6980 NORTHWEST 67TH COURT

City PARKLAND	State FL	Zip Code 33067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADOBE SYSTEMS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
293.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2021

Transaction ID : A-21552

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SADLER, SHONE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6980 NORTHWEST 67TH COURT
 City PARKLAND State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADOBE SYSTEMS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 318.09

Date of Receipt 12 / 07 / 2021
Transaction ID : A-21551
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SALVATORE, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 MOTT STREET
 City NEW YORK State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GAUNTLET NETWORK Occupation (for Individual) DATA SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 20 / 2021
Transaction ID : A-21579
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SALVATORE, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 MOTT STREET
 City NEW YORK State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GAUNTLET NETWORK Occupation (for Individual) DATA SCIENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 20 / 2021
Transaction ID : A-21578
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 285 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SALVATORE, ANTHONY, , ,

Mailing Address **202 MOTT STREET**

City NEW YORK	State NY	Zip Code 10012
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GAUNTLET NETWORK	Occupation (for Individual) DATA SCIENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
12 / 20 / 2021

Transaction ID : A-21577

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SANTOS, JEFFREY, , ,

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 ▼
210.00

Date of Receipt
09 / 20 / 2021

Transaction ID : A-21602

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SANTOS, JEFFREY, , ,

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 ▼
220.00

Date of Receipt
10 / 20 / 2021

Transaction ID : A-21601

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MISES PAC

A. 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 ▼ 230.00

Date of Receipt 11 / 20 / 2021
Transaction ID : A-21600
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. 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 ▼ 240.00

Date of Receipt 12 / 20 / 2021
Transaction ID : A-21599
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. SATTERFIELD, TATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1138 ADDINGTON LANE
 City WALESKA State GA Zip Code 30183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DYNAMIC INSTALLATIONS LLC Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 06 / 2021
Transaction ID : A-21608
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SATTERFIELD, TATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1138 ADDINGTON LANE
 City WALESKA State GA Zip Code 30183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DYNAMIC INSTALLATIONS LLC Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2021
Transaction ID : A-21607
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. SATTERFIELD, TATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1138 ADDINGTON LANE
 City WALESKA State GA Zip Code 30183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DYNAMIC INSTALLATIONS LLC Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 06 / 2021
Transaction ID : A-21606
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. SAUCIER, CHANTAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 66
 City MAURICE State LA Zip Code 70555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JOURNALIST, REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 10 / 2021
Transaction ID : A-21618
 Amount of Each Receipt this Period 20.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 288 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SAUCIER, CHANTAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 66

City MAURICE	State LA	Zip Code 70555
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) JOURNALIST, REAL ESTATE INVEST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2021

Transaction ID : A-21617

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

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
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TJ. MCCARTNEY	Occupation (for Individual) CARPENTER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2021

Transaction ID : A-21631

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

C. 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
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TJ. MCCARTNEY	Occupation (for Individual) CARPENTER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
247.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2021

Transaction ID : A-21630

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	72.12
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 289 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SAWYER, ERIK, , ,			Date of Receipt
Mailing Address 71 PUPKIS RD.			<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2021"/>
City TEWKSBURY	State MA	Zip Code 01876	Transaction ID : A-21629
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="26.06"/>
Name of Employer (for Individual) TJ. MCCARTNEY		Occupation (for Individual) CARPENTER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="273.73"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SAWYER, ERIK, , ,			Date of Receipt
Mailing Address 71 PUPKIS RD.			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2021"/>
City TEWKSBURY	State MA	Zip Code 01876	Transaction ID : A-21628
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="26.06"/>
Name of Employer (for Individual) TJ. MCCARTNEY		Occupation (for Individual) CARPENTER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="299.79"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SAWYER, ERIK, , ,			Date of Receipt
Mailing Address 71 PUPKIS RD.			<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2021"/>
City TEWKSBURY	State MA	Zip Code 01876	Transaction ID : A-21627
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="26.06"/>
Name of Employer (for Individual) TJ. MCCARTNEY		Occupation (for Individual) CARPENTER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="325.85"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="78.18"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. 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
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TJ. MCCARTNEY Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.91

Date of Receipt **12 / 24 / 2021**
Transaction ID : A-21626
 Amount of Each Receipt this Period 26.06
 Memo Item
CONTRIBUTION

B. SAYLER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6540 FAIRVIEW AVE
 City DOWNERS GROVE State IL Zip Code 60516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALKDESK Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 26 / 2021**
Transaction ID : A-21640
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. SAYLER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6540 FAIRVIEW AVE
 City DOWNERS GROVE State IL Zip Code 60516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALKDESK Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **10 / 26 / 2021**
Transaction ID : A-21639
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	126.06
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. SAYLER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6540 FAIRVIEW AVE
 City DOWNERS GROVE State IL Zip Code 60516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALKDESK Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 26 / 2021
Transaction ID : A-21638
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SAYLER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6540 FAIRVIEW AVE
 City DOWNERS GROVE State IL Zip Code 60516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALKDESK Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 26 / 2021
Transaction ID : A-21637
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 VINE STREET
 City LANSING State MI Zip Code 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AF GROUP Occupation (for Individual) ACTUARY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 20 / 2021
Transaction ID : A-21718
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. SEISER, REINHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17237 WEST 12TH AVENUE
 City GOLDEN State CO Zip Code 80401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NREL Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 29 / 2021
Transaction ID : A-21739
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SEISER, REINHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17237 WEST 12TH AVENUE
 City GOLDEN State CO Zip Code 80401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NREL Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 29 / 2021
Transaction ID : A-21738
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KREKELER JEWELERS INC. Occupation (for Individual) GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 24 / 2021
Transaction ID : A-21755
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 293 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KREKELER JEWELERS INC. GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2021
Transaction ID : A-21756
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KREKELER JEWELERS INC. GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2021
Transaction ID : A-21753
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KREKELER JEWELERS INC. GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2021
Transaction ID : A-21754
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KREKELER JEWELERS INC. Occupation (for Individual) GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 10 / 01 / 2021
Transaction ID : A-21751
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KREKELER JEWELERS INC. Occupation (for Individual) GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 10 / 01 / 2021
Transaction ID : A-21752
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KREKELER JEWELERS INC. Occupation (for Individual) GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 10 / 24 / 2021
Transaction ID : A-21749
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 295 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KREKELER JEWELERS INC. GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2021
Transaction ID : A-21750
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KREKELER JEWELERS INC. GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2021
Transaction ID : A-21748
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. SELLERS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 CHARBONIER ROAD
 City FLORISSANT State MO Zip Code 63031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KREKELER JEWELERS INC. GOLDSMITH/NUMISMATIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2021
Transaction ID : A-21747
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MISES PAC

A. SHARPE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6001 ARBOR RIDGE

City FORT WORTH	State TX	Zip Code 76132
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILDLIFE	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2021

Transaction ID : A-21783

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SHEARBURN, RYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 S. DE ANZA BLVD STE 3

City SAN JOSE	State CA	Zip Code 95129
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPA AND SAUNO CO	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
419.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2021

Transaction ID : A-21786

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SHUKNECHT, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2613 HOLLINGBOURNE DR

City FORT COLLINS	State CO	Zip Code 80526
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) STAY AT HOME PARENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2021

Transaction ID : A-21812

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 297 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHUKNECHT, SUZANNE, , ,

Mailing Address 2613 HOLLINGBOURNE DR

City FORT COLLINS	State CO	Zip Code 80526
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) STAY AT HOME PARENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2021

Transaction ID : A-21811

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHUTE, CRAIG, L, ,

Mailing Address 5975 U.S. 20

City LAFAYETTE	State NY	Zip Code 13084
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PROPERTY MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2021

Transaction ID : A-21822

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHUTE, CRAIG, L, ,

Mailing Address 5975 U.S. 20

City LAFAYETTE	State NY	Zip Code 13084
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PROPERTY MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2021

Transaction ID : A-21821

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 298 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHUTE, CRAIG, L, ,

Mailing Address 5975 U.S. 20

City LAFAYETTE	State NY	Zip Code 13084
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PROPERTY MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2021

Transaction ID : A-21820

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHUTE, CRAIG, L, ,

Mailing Address 5975 U.S. 20

City LAFAYETTE	State NY	Zip Code 13084
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PROPERTY MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2021

Transaction ID : A-21819

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHUTE, CRAIG, L, ,

Mailing Address 5975 U.S. 20

City LAFAYETTE	State NY	Zip Code 13084
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PROPERTY MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2021

Transaction ID : A-21818

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 299 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SHUTE, CRAIG, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5975 U.S. 20
 City LAFAYETTE State NY Zip Code 13084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2021
Transaction ID : A-21817
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. SIMONSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1496 RAYMOND AVENUE
 City SAINT PAUL State MN Zip Code 55108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2021
Transaction ID : A-21874
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. SIMONSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1496 RAYMOND AVENUE
 City SAINT PAUL State MN Zip Code 55108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2021
Transaction ID : A-21873
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 300 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SIMONSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1496 RAYMOND AVENUE
 City SAINT PAUL State MN Zip Code 55108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 28 / 2021**
Transaction ID : A-21872
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SIMONSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1496 RAYMOND AVENUE
 City SAINT PAUL State MN Zip Code 55108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 28 / 2021**
Transaction ID : A-21871
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13311 433RD CT SE
 City NORTH BEND State WA Zip Code 98045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBANT Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.98

Date of Receipt **09 / 21 / 2021**
Transaction ID : A-21945
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 55.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SMITH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13311 433RD CT SE
 City NORTH BEND State WA Zip Code 98045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBANT Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2021
Transaction ID : A-21944
 Amount of Each Receipt this Period 5.00
 Memo Item
 CONTRIBUTION

B. SMITH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13311 433RD CT SE
 City NORTH BEND State WA Zip Code 98045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBANT Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2021
Transaction ID : A-21943
 Amount of Each Receipt this Period 5.00
 Memo Item
 CONTRIBUTION

C. SMITH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13311 433RD CT SE
 City NORTH BEND State WA Zip Code 98045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBANT Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2021
Transaction ID : A-21903
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. SMITH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13311 433RD CT SE
 City NORTH BEND State WA Zip Code 98045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBANT Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2021
Transaction ID : A-21942
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MARSHALL STREET
 City LANSING State MI Zip Code 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED HAT Occupation (for Individual) SOFTWARE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2021
Transaction ID : A-21914
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. SMITH, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MARSHALL STREET
 City LANSING State MI Zip Code 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED HAT Occupation (for Individual) SOFTWARE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2021
Transaction ID : A-21913
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 303 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SMITH, JOSHUA, , ,

Mailing Address 215 MARSHALL STREET

City LANSING	State MI	Zip Code 48912
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED HAT	Occupation (for Individual) SOFTWARE ARCHITECT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
727.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2021

Transaction ID : A-21912

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SMITH, JOSHUA, , ,

Mailing Address 215 MARSHALL STREET

City LANSING	State MI	Zip Code 48912
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED HAT	Occupation (for Individual) SOFTWARE ARCHITECT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
777.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2021

Transaction ID : A-21911

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SMITH, JOSHUA, , ,

Mailing Address 215 MARSHALL STREET

City LANSING	State MI	Zip Code 48912
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED HAT	Occupation (for Individual) SOFTWARE ARCHITECT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
827.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2021

Transaction ID : A-21910

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 304 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SMITH, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MARSHALL STREET
 City LANSING State MI Zip Code 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED HAT Occupation (for Individual) SOFTWARE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 877.40

Date of Receipt 12 / 27 / 2021
Transaction ID : A-21909
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SOUTER, JOSH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 SOUTH UNION BOULEVARD
 City LAKEWOOD State CO Zip Code 80228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRSTBANK Occupation (for Individual) IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 08 / 2021
Transaction ID : A-22006
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SOUTER, JOSH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 SOUTH UNION BOULEVARD
 City LAKEWOOD State CO Zip Code 80228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRSTBANK Occupation (for Individual) IT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 08 / 2021
Transaction ID : A-22005
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SOUTER, JOSH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 622 SOUTH UNION BOULEVARD

City LAKEWOOD	State CO	Zip Code 80228
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRSTBANK	Occupation (for Individual) IT
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2021

Transaction ID : A-22004

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SOUTER, JOSH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 622 SOUTH UNION BOULEVARD

City LAKEWOOD	State CO	Zip Code 80228
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRSTBANK	Occupation (for Individual) IT
--	-----------------------------------

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
12		08		2021

Transaction ID : A-22003

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. STANISZEWSKI, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3439 NE SANDY BLVD.

City PORTLAND	State OR	Zip Code 97232
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
202.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2021

Transaction ID : A-22053

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. STARE, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2354 LANDA ST
 City LOS ANGELES State CA Zip Code 90039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IMBELLUS, INC. Occupation (for Individual) LEARNING SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 17 / 2021
Transaction ID : A-22066
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STARE, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2354 LANDA ST
 City LOS ANGELES State CA Zip Code 90039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IMBELLUS, INC. Occupation (for Individual) LEARNING SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2021
Transaction ID : A-22065
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STARE, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2354 LANDA ST
 City LOS ANGELES State CA Zip Code 90039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IMBELLUS, INC. Occupation (for Individual) LEARNING SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 17 / 2021
Transaction ID : A-22064
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 307 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. STARE, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2354 LANDA ST
 City LOS ANGELES State CA Zip Code 90039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IMBELLUS, INC. Occupation (for Individual) LEARNING SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 17 / 2021
Transaction ID : A-22063
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STONEHOUSE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 279 SOUTH MARBLE CANYON CIRCLE
 City CEDAR CITY State UT Zip Code 84720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OIL AND GAS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 03 / 2021
Transaction ID : A-22106
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. STRACHAN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21980 SADDLE PEAK ROAD
 City TOPANGA State CA Zip Code 90290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 247.98

Date of Receipt 07 / 18 / 2021
Transaction ID : A-22137
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 325.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. STRACHAN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21980 SADDLE PEAK ROAD
 City TOPANGA State CA Zip Code 90290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 297.98

Date of Receipt 08 / 18 / 2021
Transaction ID : A-22136
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STRACHAN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21980 SADDLE PEAK ROAD
 City TOPANGA State CA Zip Code 90290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.98

Date of Receipt 09 / 18 / 2021
Transaction ID : A-22135
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STRACHAN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21980 SADDLE PEAK ROAD
 City TOPANGA State CA Zip Code 90290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 397.98

Date of Receipt 10 / 18 / 2021
Transaction ID : A-22134
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 309 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. STRACHAN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21980 SADDLE PEAK ROAD
 City TOPANGA State CA Zip Code 90290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 447.98

Date of Receipt 11 / 18 / 2021
Transaction ID : A-22133
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STRACHAN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21980 SADDLE PEAK ROAD
 City TOPANGA State CA Zip Code 90290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 497.98

Date of Receipt 12 / 18 / 2021
Transaction ID : A-22132
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STRYJEWSKI, MOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2913 CHELSEA WOODS DRIVE
 City VALRICO State FL Zip Code 33596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NUNYA BUSINESS Occupation (for Individual) OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 18 / 2021
Transaction ID : A-22152
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STRYJEWSKI, MOLLY, , ,

Mailing Address 2913 CHELSEA WOODS DRIVE

City VALRICO	State FL	Zip Code 33596
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NUNYA BUSINESS	Occupation (for Individual) OPERATIONS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2021

Transaction ID : A-22151

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STRYJEWSKI, MOLLY, , ,

Mailing Address 2913 CHELSEA WOODS DRIVE

City VALRICO	State FL	Zip Code 33596
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NUNYA BUSINESS	Occupation (for Individual) OPERATIONS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2021

Transaction ID : A-22150

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STRYJEWSKI, MOLLY, , ,

Mailing Address 2913 CHELSEA WOODS DRIVE

City VALRICO	State FL	Zip Code 33596
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NUNYA BUSINESS	Occupation (for Individual) OPERATIONS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2021

Transaction ID : A-22149

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 311 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. STRYJEWSKI, MOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2913 CHELSEA WOODS DRIVE
 City VALRICO State FL Zip Code 33596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NUNYA BUSINESS Occupation (for Individual) OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 18 / 2021
Transaction ID : A-22148
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

B. STRYJEWSKI, MOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2913 CHELSEA WOODS DRIVE
 City VALRICO State FL Zip Code 33596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NUNYA BUSINESS Occupation (for Individual) OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 18 / 2021
Transaction ID : A-22147
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

C. SUGDEN, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3211 165TH PLACE NORTHEAST
 City BELLEVUE State WA Zip Code 98008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 06 / 2021
Transaction ID : A-22160
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 312 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SUMNER, STEPHEN, , ,			Date of Receipt
Mailing Address 590 SANDRIDGE RD			<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2021"/>
City PINK HILL	State NC	Zip Code 28572	Transaction ID : A-23333
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="49.89"/>
Name of Employer (for Individual) EDGE-WORKS MANUFACTURING CO		Occupation (for Individual) MANAGEMENT	<input type="checkbox"/> Memo Item CONTRIBUTIOON
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="229.89"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SUMNER, STEPHEN, , ,			Date of Receipt
Mailing Address 590 SANDRIDGE RD			<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2021"/>
City PINK HILL	State NC	Zip Code 28572	Transaction ID : A-22167
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) EDGE-WORKS MANUFACTURING CO		Occupation (for Individual) MANAGEMENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="254.89"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SUMNER, STEPHEN, , ,			Date of Receipt
Mailing Address 590 SANDRIDGE RD			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2021"/>
City PINK HILL	State NC	Zip Code 28572	Transaction ID : A-22166
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) EDGE-WORKS MANUFACTURING CO		Occupation (for Individual) MANAGEMENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="279.89"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="99.89"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SUMNER, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 590 SANDRIDGE RD

City PINK HILL	State NC	Zip Code 28572
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDGE-WORKS MANUFACTURING CO	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
304.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2021

Transaction ID : A-22165

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SUNY, ARMEN, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 LIONS HEAD DRIVE

City MONUMENT	State CO	Zip Code 80132
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) COUNTRY CLUB MGMT RECRUITER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2021

Transaction ID : A-22172

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SUTTER, COLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 927 ADELE ST.

City HOUSTON	State TX	Zip Code 77009
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BUSINESS OWNER	Occupation (for Individual) RECRUITER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
387.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2021

Transaction ID : A-22201

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SUTTER, COLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 927 ADELE ST.

City HOUSTON	State TX	Zip Code 77009
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BUSINESS OWNER	Occupation (for Individual) RECRUITER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
397.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2021

Transaction ID : A-22200

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. SUTTER, COLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 927 ADELE ST.

City HOUSTON	State TX	Zip Code 77009
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BUSINESS OWNER	Occupation (for Individual) RECRUITER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
447.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2021

Transaction ID : A-22199

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SUTTER, COLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 927 ADELE ST.

City HOUSTON	State TX	Zip Code 77009
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BUSINESS OWNER	Occupation (for Individual) RECRUITER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
457.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2021

Transaction ID : A-22198

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 315 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SUTTER, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ADELE ST.
 City HOUSTON State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.40

Date of Receipt 09 / 14 / 2021
Transaction ID : A-22197
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. SUTTER, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ADELE ST.
 City HOUSTON State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.40

Date of Receipt 09 / 18 / 2021
Transaction ID : A-22196
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

C. SUTTER, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ADELE ST.
 City HOUSTON State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.40

Date of Receipt 10 / 11 / 2021
Transaction ID : A-22195
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 OF 525
	<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. SUTTER, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ADELE ST.
 City HOUSTON State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 577.40

Date of Receipt 10 / 18 / 2021
Transaction ID : A-22194
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. SUTTER, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ADELE ST.
 City HOUSTON State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.40

Date of Receipt 11 / 11 / 2021
Transaction ID : A-22193
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SUTTER, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ADELE ST.
 City HOUSTON State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.40

Date of Receipt 11 / 18 / 2021
Transaction ID : A-22192
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 317 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SUTTER, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ADELE ST.
 City HOUSTON State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 687.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2021
Transaction ID : A-22191
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. SUTTER, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ADELE ST.
 City HOUSTON State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 697.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2021
Transaction ID : A-22190
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

C. SWENDDAL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3736 E. LAFAYETTE AVE
 City GILBERT State AZ Zip Code 85298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIVE LOVES APPLE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2021
Transaction ID : A-22224
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENDDAL, TODD, , ,

Mailing Address 3736 E. LAFAYETTE AVE

City GILBERT	State AZ	Zip Code 85298
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLIVE LOVES APPLE	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2021

Transaction ID : A-22223

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENDDAL, TODD, , ,

Mailing Address 3736 E. LAFAYETTE AVE

City GILBERT	State AZ	Zip Code 85298
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLIVE LOVES APPLE	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2021

Transaction ID : A-22222

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENDDAL, TODD, , ,

Mailing Address 3736 E. LAFAYETTE AVE

City GILBERT	State AZ	Zip Code 85298
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLIVE LOVES APPLE	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2021

Transaction ID : A-22221

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 319 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENSON, JILL, , ,

Mailing Address **81 GENTLE DRIVE**

City EAST EARL	State PA	Zip Code 17519
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MLM
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2021

Transaction ID : A-22231

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENSON, JILL, , ,

Mailing Address **81 GENTLE DRIVE**

City EAST EARL	State PA	Zip Code 17519
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MLM
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2021

Transaction ID : A-22230

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENSON, JILL, , ,

Mailing Address **81 GENTLE DRIVE**

City EAST EARL	State PA	Zip Code 17519
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MLM
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2021

Transaction ID : A-22229

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 320 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENSON, JILL, , ,

Mailing Address 81 GENTLE DRIVE

City EAST EARL	State PA	Zip Code 17519
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MLM
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2021

Transaction ID : A-22228

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENSON, JILL, , ,

Mailing Address 81 GENTLE DRIVE

City EAST EARL	State PA	Zip Code 17519
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MLM
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2021

Transaction ID : A-22227

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWENSON, JILL, , ,

Mailing Address 81 GENTLE DRIVE

City EAST EARL	State PA	Zip Code 17519
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MLM
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2021

Transaction ID : A-22226

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. TAFTE, DEREK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 188 WESTOVER DRIVE

City AKRON	State OH	Zip Code 44313
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ONQ SOLUTIONS	Occupation (for Individual) WAREHOUSE MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2021

Transaction ID : A-22255

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TAFTE, DEREK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 188 WESTOVER DRIVE

City AKRON	State OH	Zip Code 44313
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ONQ SOLUTIONS	Occupation (for Individual) WAREHOUSE MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2021

Transaction ID : A-22254

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TALVOLA, ERIK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1779 BROOKS STREET

City SAN MATEO	State CA	Zip Code 94403
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLARIFY HEALTH SOLUTIONS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2021

Transaction ID : A-22274

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. TALVOLA, ERIK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1779 BROOKS STREET

City SAN MATEO	State CA	Zip Code 94403
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLARIFY HEALTH SOLUTIONS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2021

Transaction ID : A-22273

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. TALVOLA, ERIK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1779 BROOKS STREET

City SAN MATEO	State CA	Zip Code 94403
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLARIFY HEALTH SOLUTIONS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2021

Transaction ID : A-22272

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. TATUM, ZACH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2391 YESTER OAKS DRIVE

City GERMANTOWN	State TN	Zip Code 38139
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRIVATE	Occupation (for Individual) PRIVATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2021

Transaction ID : A-22317

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MISES PAC

A. TATUM, ZACH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2391 YESTER OAKS DRIVE

City GERMANTOWN	State TN	Zip Code 38139
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRIVATE	Occupation (for Individual) PRIVATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2021

Transaction ID : A-22309

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. TATUM, ZACH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2391 YESTER OAKS DRIVE

City GERMANTOWN	State TN	Zip Code 38139
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRIVATE	Occupation (for Individual) PRIVATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2021

Transaction ID : A-22316

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. TATUM, ZACH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2391 YESTER OAKS DRIVE

City GERMANTOWN	State TN	Zip Code 38139
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRIVATE	Occupation (for Individual) PRIVATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2021

Transaction ID : A-22308

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. TATUM, ZACH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2391 YESTER OAKS DRIVE

City GERMANTOWN	State TN	Zip Code 38139
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PRIVATE		Occupation (for Individual) PRIVATE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 355.00

Date of Receipt
12 / 23 / 2021
Transaction ID : A-22315

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. TAYLOR, RODGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 22801 SE NAOMI DR

City DAMASCUS	State OR	Zip Code 97089
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) WINCO FOODS		Occupation (for Individual) STORE MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
09 / 12 / 2021
Transaction ID : A-22327

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TAYLOR, RODGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 22801 SE NAOMI DR

City DAMASCUS	State OR	Zip Code 97089
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) WINCO FOODS		Occupation (for Individual) STORE MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 12 / 2021
Transaction ID : A-22326

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MISES PAC

A. TAYLOR, RODGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22801 SE NAOMI DR
 City DAMASCUS State OR Zip Code 97089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINCO FOODS Occupation (for Individual) STORE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 12 / 2021
Transaction ID : A-22325
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TAYLOR, RODGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22801 SE NAOMI DR
 City DAMASCUS State OR Zip Code 97089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINCO FOODS Occupation (for Individual) STORE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 12 / 2021
Transaction ID : A-22324
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TEWKSBURY, JESSICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1608
 City ANZA State CA Zip Code 92539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 222.45

Date of Receipt 08 / 06 / 2021
Transaction ID : A-22358
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TEWKSBURY, JESSICA, , ,

Mailing Address **PO BOX 1608**

City ANZA	State CA	Zip Code 92539
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.45

Date of Receipt
09 / 06 / 2021

Transaction ID : A-22357

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TEWKSBURY, JESSICA, , ,

Mailing Address **PO BOX 1608**

City ANZA	State CA	Zip Code 92539
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.45

Date of Receipt
10 / 06 / 2021

Transaction ID : A-22356

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TEWKSBURY, JESSICA, , ,

Mailing Address **PO BOX 1608**

City ANZA	State CA	Zip Code 92539
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
312.45

Date of Receipt
11 / 06 / 2021

Transaction ID : A-22355

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 327 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. TEWKSBURY, JESSICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1608
 City ANZA State CA Zip Code 92539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 342.45

Date of Receipt **12 / 06 / 2021**
Transaction ID : A-22354
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. THORNTON, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 PRAIRIE BLUFFS DRIVE
 City WENTZVILLE State MO Zip Code 63385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 227.40

Date of Receipt **07 / 20 / 2021**
Transaction ID : A-22422
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. THORNTON, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 PRAIRIE BLUFFS DRIVE
 City WENTZVILLE State MO Zip Code 63385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 252.40

Date of Receipt **08 / 20 / 2021**
Transaction ID : A-22421
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 328 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. THORNTON, JOE, , ,

Mailing Address 116 PRAIRIE BLUFFS DRIVE

City WENTZVILLE	State MO	Zip Code 63385
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2021

Transaction ID : A-22420

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. THORNTON, JOE, , ,

Mailing Address 116 PRAIRIE BLUFFS DRIVE

City WENTZVILLE	State MO	Zip Code 63385
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

Transaction ID : A-22419

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. THORNTON, JOE, , ,

Mailing Address 116 PRAIRIE BLUFFS DRIVE

City WENTZVILLE	State MO	Zip Code 63385
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
327.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2021

Transaction ID : A-22418

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. THORNTON, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 116 PRAIRIE BLUFFS DRIVE

City WENTZVILLE	State MO	Zip Code 63385
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
352.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2021

Transaction ID : A-22417

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TUNELL, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 510 TOFTREES AVENUE

City STATE COLLEGE	State PA	Zip Code 16803
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMMES	Occupation (for Individual) PROGRAMMER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2021

Transaction ID : A-22500

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TUNELL, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 510 TOFTREES AVENUE

City STATE COLLEGE	State PA	Zip Code 16803
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMMES	Occupation (for Individual) PROGRAMMER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2021

Transaction ID : A-22499

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 330 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. VAN WAGNER, JOSEPH, , ,

Mailing Address 1080 11TH STREET

City PENNSBURG	State PA	Zip Code 18073
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SLALOM	Occupation (for Individual) PROGRAMMER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2021

Transaction ID : A-22559

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. VAN WAGNER, JOSEPH, , ,

Mailing Address 1080 11TH STREET

City PENNSBURG	State PA	Zip Code 18073
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SLALOM	Occupation (for Individual) PROGRAMMER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2021

Transaction ID : A-22558

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VAN WAGNER, JOSEPH, , ,

Mailing Address 1080 11TH STREET

City PENNSBURG	State PA	Zip Code 18073
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SLALOM	Occupation (for Individual) PROGRAMMER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2021

Transaction ID : A-22557

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 331 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. VAN WAGNER, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 11TH STREET
 City PENNSBURG State PA Zip Code 18073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLALOM Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 05 / 2021
Transaction ID : A-22556
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. VAN WAGNER, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 11TH STREET
 City PENNSBURG State PA Zip Code 18073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLALOM Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 580.00

Date of Receipt 11 / 05 / 2021
Transaction ID : A-22555
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. VAN WAGNER, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 11TH STREET
 City PENNSBURG State PA Zip Code 18073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLALOM Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 05 / 2021
Transaction ID : A-22554
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 332 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. VELDHUYZEN, ALBERT, , ,

Mailing Address 75 HOLLY CORNER ROAD

City FREDERICKSBURG	State VA	Zip Code 22406
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US ARMY	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2021

Transaction ID : A-22585

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. VELDHUYZEN, ALBERT, , ,

Mailing Address 75 HOLLY CORNER ROAD

City FREDERICKSBURG	State VA	Zip Code 22406
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US ARMY	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2021

Transaction ID : A-22584

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VELDHUYZEN, ALBERT, , ,

Mailing Address 75 HOLLY CORNER ROAD

City FREDERICKSBURG	State VA	Zip Code 22406
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US ARMY	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		11		2021

Transaction ID : A-22583

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. VELDHUYZEN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 HOLLY CORNER ROAD
 City FREDERICKSBURG State VA Zip Code 22406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 11 / 2021**
Transaction ID : A-22582
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. VICK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 FORTRESS DR
 City WINCHESTER State VA Zip Code 22603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LCFR Occupation (for Individual) FIREFIGHTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.63

Date of Receipt **07 / 04 / 2021**
Transaction ID : A-22611
 Amount of Each Receipt this Period 10.61
 Memo Item CONTRIBUTION

C. VICK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 FORTRESS DR
 City WINCHESTER State VA Zip Code 22603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LCFR Occupation (for Individual) FIREFIGHTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.69

Date of Receipt **07 / 13 / 2021**
Transaction ID : A-22610
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	61.67
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER State VA Zip Code 22603

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR Occupation (for Individual) FIREFIGHTER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.30

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2021

Transaction ID : A-22609

Amount of Each Receipt this Period
10.61

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER State VA Zip Code 22603

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR Occupation (for Individual) FIREFIGHTER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.36

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2021

Transaction ID : A-22608

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER State VA Zip Code 22603

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR Occupation (for Individual) FIREFIGHTER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
303.97

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2021

Transaction ID : A-22607

Amount of Each Receipt this Period
10.61

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 47.28

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 335 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER	State VA	Zip Code 22603
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR	Occupation (for Individual) FIREFIGHTER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2021

Transaction ID : A-22606

Amount of Each Receipt this Period
26.06

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER	State VA	Zip Code 22603
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR	Occupation (for Individual) FIREFIGHTER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2021

Transaction ID : A-22605

Amount of Each Receipt this Period
10.61

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER	State VA	Zip Code 22603
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR	Occupation (for Individual) FIREFIGHTER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
366.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2021

Transaction ID : A-22604

Amount of Each Receipt this Period
26.06

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	62.73
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER	State VA	Zip Code 22603
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR	Occupation (for Individual) FIREFIGHTER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.31

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2021

Transaction ID : A-22603

Amount of Each Receipt this Period

10.61

 Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER	State VA	Zip Code 22603
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR	Occupation (for Individual) FIREFIGHTER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 13 / 2021

Transaction ID : A-22602

Amount of Each Receipt this Period

26.06

 Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VICK, DONALD, , ,

Mailing Address 110 FORTRESS DR

City WINCHESTER	State VA	Zip Code 22603
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR	Occupation (for Individual) FIREFIGHTER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
413.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 04 / 2021

Transaction ID : A-22601

Amount of Each Receipt this Period

10.61

 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	47.28
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 337 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. VICK, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 FORTRESS DR

City WINCHESTER	State VA	Zip Code 22603
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LCFR	Occupation (for Individual) FIREFIGHTER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2021

Transaction ID : A-22600

Amount of Each Receipt this Period
26.06

Memo Item
CONTRIBUTION

B. VINSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3621 SUMMIT BOULEVARD

City PENSACOLA	State FL	Zip Code 32503
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BARRY SCHOOL OF LAW	Occupation (for Individual) STUDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2021

Transaction ID : A-22625

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. VINSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3621 SUMMIT BOULEVARD

City PENSACOLA	State FL	Zip Code 32503
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BARRY SCHOOL OF LAW	Occupation (for Individual) STUDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2021

Transaction ID : A-22624

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	76.06
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 338 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. VOGEL, A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3845 MCGRATH DRIVE
 City DUBLIN State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 14 / 2021
Transaction ID : A-23229
 Amount of Each Receipt this Period 500.00
 Memo Item

B. VOGEL, A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3845 MCGRATH DRIVE
 City DUBLIN State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 12 / 13 / 2021
Transaction ID : A-23224
 Amount of Each Receipt this Period 500.00
 Memo Item

C. VOGEL, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3625 NE 46TH AVE
 City PORTLAND State OR Zip Code 97213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEPARTMENT OF ENERGY Occupation (for Individual) HR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2021
Transaction ID : A-22634
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 339 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. VOGEL, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3625 NE 46TH AVE

City PORTLAND	State OR	Zip Code 97213
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEPARTMENT OF ENERGY	Occupation (for Individual) HR
---	-----------------------------------

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
09		01		2021

Transaction ID : A-22633

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WAKER, JONNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 385 PUCKET CIRCLE

City COLORADO SPRINGS	State CO	Zip Code 80911
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BROWNS HILL ENGINEERING & CONTROLS	Occupation (for Individual) FIELD TECHNICIAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2021

Transaction ID : A-22664

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WAKER, JONNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 385 PUCKET CIRCLE

City COLORADO SPRINGS	State CO	Zip Code 80911
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BROWNS HILL ENGINEERING & CONTROLS	Occupation (for Individual) FIELD TECHNICIAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2021

Transaction ID : A-22663

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 340 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WAKER, JONNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 PUCKET CIRCLE
 City COLORADO SPRINGS State CO Zip Code 80911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWNS HILL ENGINEERING & CONTROLS Occupation (for Individual) FIELD TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 01 / 2021
Transaction ID : A-22662
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WAKER, JONNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 PUCKET CIRCLE
 City COLORADO SPRINGS State CO Zip Code 80911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWNS HILL ENGINEERING & CONTROLS Occupation (for Individual) FIELD TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 01 / 2021
Transaction ID : A-22661
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WAKER, JONNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 PUCKET CIRCLE
 City COLORADO SPRINGS State CO Zip Code 80911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWNS HILL ENGINEERING & CONTROLS Occupation (for Individual) FIELD TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 01 / 2021
Transaction ID : A-22660
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 341 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WAKER, JONNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 PUCKET CIRCLE
 City COLORADO SPRINGS State CO Zip Code 80911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWNS HILL ENGINEERING & CONTROLS Occupation (for Individual) FIELD TECHNICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 01 / 2021**
Transaction ID : A-22659
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WALKER, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4048 EAGLE RIDGE CT
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 06 / 2021**
Transaction ID : A-22671
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WALLACE, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 GREEN LN
 City PHILADELPHIA State PA Zip Code 19127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PPL CORP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 28 / 2021**
Transaction ID : A-22686
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 342 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WALLACE, MATTHEW, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2021
Mailing Address 115 GREEN LN		Transaction ID : A-22685
City PHILADELPHIA	State PA	Zip Code 19127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) PPL CORP	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WALLACE, MATTHEW, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2021
Mailing Address 115 GREEN LN		Transaction ID : A-22684
City PHILADELPHIA	State PA	Zip Code 19127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) PPL CORP	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WALLACE, MATTHEW, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2021
Mailing Address 115 GREEN LN		Transaction ID : A-22683
City PHILADELPHIA	State PA	Zip Code 19127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) PPL CORP	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 343 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WATSON, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7567 ANDREA DRIVE

City CONCORD TOWNSHIP	State OH	Zip Code 44060
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROGRESSIVE INSURANCE	Occupation (for Individual) SOFTWARE DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2021

Transaction ID : A-22756

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WHITE, JOSHUA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 SHROYER RD

City DAYTON	State OH	Zip Code 45419
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY TISSUE SERVICES	Occupation (for Individual) TISSUE RECOVERY COORDINATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2021

Transaction ID : A-22912

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

C. WHITE, JOSHUA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 SHROYER RD

City DAYTON	State OH	Zip Code 45419
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY TISSUE SERVICES	Occupation (for Individual) TISSUE RECOVERY COORDINATOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
234.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2021

Transaction ID : A-22911

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	77.12
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 344 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WHITE, JOSHUA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 SHROYER RD

City DAYTON	State OH	Zip Code 45419
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY TISSUE SERVICES	Occupation (for Individual) TISSUE RECOVERY COORDINATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2021

Transaction ID : A-22910

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

B. WHITE, JOSHUA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 SHROYER RD

City DAYTON	State OH	Zip Code 45419
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY TISSUE SERVICES	Occupation (for Individual) TISSUE RECOVERY COORDINATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2021

Transaction ID : A-22909

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

C. WHITE, JOSHUA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 SHROYER RD

City DAYTON	State OH	Zip Code 45419
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY TISSUE SERVICES	Occupation (for Individual) TISSUE RECOVERY COORDINATOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
312.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2021

Transaction ID : A-22908

Amount of Each Receipt this Period
26.06

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	78.18
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 345 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WHITING, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9099 WALNUT ROAD SOUTHEAST
 City BEMIDJI State MN Zip Code 56601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AGRICULTURE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 26 / 2021**
Transaction ID : A-22929
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. WHITWORTH, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6526 BROOK VILLAGE COVE
 City BRADENTON State FL Zip Code 34202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ITELAGEN, LLC Occupation (for Individual) SOFTWARE DEVELOPMENT/PROGR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00

Date of Receipt **08 / 14 / 2021**
Transaction ID : A-22939
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. WHITWORTH, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6526 BROOK VILLAGE COVE
 City BRADENTON State FL Zip Code 34202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ITELAGEN, LLC Occupation (for Individual) SOFTWARE DEVELOPMENT/PROGR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 229.00

Date of Receipt **09 / 14 / 2021**
Transaction ID : A-22938
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 346 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WHITWORTH, ADAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6526 BROOK VILLAGE COVE

City BRADENTON	State FL	Zip Code 34202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ITELAGEN, LLC	Occupation (for Individual) SOFTWARE DEVELOPMENT/PROGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2021

Transaction ID : A-22937

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WHITWORTH, ADAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6526 BROOK VILLAGE COVE

City BRADENTON	State FL	Zip Code 34202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ITELAGEN, LLC	Occupation (for Individual) SOFTWARE DEVELOPMENT/PROGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
279.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2021

Transaction ID : A-22936

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WHITWORTH, ADAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6526 BROOK VILLAGE COVE

City BRADENTON	State FL	Zip Code 34202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ITELAGEN, LLC	Occupation (for Individual) SOFTWARE DEVELOPMENT/PROGR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2021

Transaction ID : A-22935

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WHORTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 987 SHORE ACRES RD
 City ARNOLD State MD Zip Code 21012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M9 SOLUTIONS LLC Occupation (for Individual) WEB DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 17 / 2021
Transaction ID : A-22942
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. WILKINS, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5919 CHATHAM CT.
 City TUCKER State GA Zip Code 30084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CATERING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 25 / 2021
Transaction ID : A-22970
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. WILLARD, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 QUAKER CHURCH RD
 City RANDOLPH State NJ Zip Code 07869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AZDEN Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 09 / 2021
Transaction ID : A-22977
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 348 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WILLARD, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 QUAKER CHURCH RD
 City RANDOLPH State NJ Zip Code 07869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AZDEN Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 09 / 2021
Transaction ID : A-22976
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLARD, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 QUAKER CHURCH RD
 City RANDOLPH State NJ Zip Code 07869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AZDEN Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 09 / 2021
Transaction ID : A-22975
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILLIAMS, CHILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 812 BILTMORE DR
 City VIRGINIA BEACH State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAE Occupation (for Individual) ENGINEERING TECHNICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 05 / 2021
Transaction ID : A-22982
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 349 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WILLIAMS, CHILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 812 BILTMORE DR
 City VIRGINIA BEACH State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAE Occupation (for Individual) ENGINEERING TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 05 / 2021**
Transaction ID : A-22981
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIAMS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1481 E OLD SETTLERS BLVD, #902
 City ROUND ROCK State TX Zip Code 78664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PODSWORTH MEDIA Occupation (for Individual) AUDIO ENGINEER / BUSINESS OWN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.48

Date of Receipt **08 / 02 / 2021**
Transaction ID : A-23004
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

C. WILLIAMS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1481 E OLD SETTLERS BLVD, #902
 City ROUND ROCK State TX Zip Code 78664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PODSWORTH MEDIA Occupation (for Individual) AUDIO ENGINEER / BUSINESS OWNE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.54

Date of Receipt **09 / 02 / 2021**
Transaction ID : A-23003
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 77.12
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 350 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WILLIAMS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1481 E OLD SETTLERS BLVD, #902
 City ROUND ROCK State TX Zip Code 78664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PODSWORTH MEDIA Occupation (for Individual) AUDIO ENGINEER / BUSINESS OWNI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.60

Date of Receipt 10 / 02 / 2021
Transaction ID : A-23002
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

B. WILLIAMS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1481 E OLD SETTLERS BLVD, #902
 City ROUND ROCK State TX Zip Code 78664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PODSWORTH MEDIA Occupation (for Individual) AUDIO ENGINEER / BUSINESS OWNI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.66

Date of Receipt 11 / 02 / 2021
Transaction ID : A-23001
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

C. WILLIAMS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1481 E OLD SETTLERS BLVD, #902
 City ROUND ROCK State TX Zip Code 78664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PODSWORTH MEDIA Occupation (for Individual) AUDIO ENGINEER / BUSINESS OWNE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.72

Date of Receipt 12 / 02 / 2021
Transaction ID : A-23000
 Amount of Each Receipt this Period 26.06
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.18
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 351 OF 525
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WILLIAMS, IVAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4514 COUNTRY CLUB ROAD

City JACKSONVILLE	State FL	Zip Code 32210
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USN	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2021

Transaction ID : A-22990

Amount of Each Receipt this Period
20.21

Memo Item
CONTRIBUTION

B. WILLIAMS, IVAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4514 COUNTRY CLUB ROAD

City JACKSONVILLE	State FL	Zip Code 32210
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USN	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
421.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2021

Transaction ID : A-22989

Amount of Each Receipt this Period
20.21

Memo Item
CONTRIBUTION

C. WILLIAMS, IVAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4514 COUNTRY CLUB ROAD

City JACKSONVILLE	State FL	Zip Code 32210
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USN	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
441.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2021

Transaction ID : A-22988

Amount of Each Receipt this Period
20.21

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.63
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 352 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WILLIAMS, IVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 COUNTRY CLUB ROAD
 City JACKSONVILLE State FL Zip Code 32210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USN Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.68

Date of Receipt 10 / 15 / 2021
Transaction ID : A-22987
 Amount of Each Receipt this Period 20.21
 Memo Item CONTRIBUTION

B. WINIARSKI, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 S PENINSULA DRIVE
 City DAYTONA BEACH State FL Zip Code 32118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARM Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 09 / 2021
Transaction ID : A-23049
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WISEMAN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2646 KELLY ST
 City HAYWARD State CA Zip Code 94541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTSON TECHNOLOGY, INC. Occupation (for Individual) LEGAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 06 / 2021
Transaction ID : A-23058
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1045.21
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 353 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISES PAC

A. WISEMAN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2646 KELLY ST
 City HAYWARD State CA Zip Code 94541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTSON TECHNOLOGY, INC. Occupation (for Individual) LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2021
Transaction ID : A-23057
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WISEMAN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2646 KELLY ST
 City HAYWARD State CA Zip Code 94541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTSON TECHNOLOGY, INC. Occupation (for Individual) LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 06 / 2021
Transaction ID : A-23056
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WOIKE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36141 JAMISON STREET
 City LIVONIA State MI Zip Code 48154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KROGER Occupation (for Individual) CASHIER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 25 / 2021
Transaction ID : A-23064
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 354 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WOIKE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36141 JAMISON STREET
 City LIVONIA State MI Zip Code 48154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KROGER Occupation (for Individual) CASHIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 25 / 2021
Transaction ID : A-23063
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. WOIKE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36141 JAMISON STREET
 City LIVONIA State MI Zip Code 48154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KROGER Occupation (for Individual) CASHIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 11 / 25 / 2021
Transaction ID : A-23062
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. WOIKE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36141 JAMISON STREET
 City LIVONIA State MI Zip Code 48154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KROGER Occupation (for Individual) CASHIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 12 / 25 / 2021
Transaction ID : A-23061
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 355 OF 525
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WOODS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7125 INDIAN GRASS ROAD
 City SAINT CLOUD State FL Zip Code 34773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HISTORIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 08 / 2021
Transaction ID : A-23085
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WOODS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7125 INDIAN GRASS ROAD
 City SAINT CLOUD State FL Zip Code 34773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HISTORIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 08 / 2021
Transaction ID : A-23084
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WOODS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7125 INDIAN GRASS ROAD
 City SAINT CLOUD State FL Zip Code 34773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HISTORIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 08 / 2021
Transaction ID : A-23083
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 356 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WOODS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7125 INDIAN GRASS ROAD

City SAINT CLOUD	State FL	Zip Code 34773
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) HISTORIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2021

Transaction ID : A-23082

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. WOODS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7125 INDIAN GRASS ROAD

City SAINT CLOUD	State FL	Zip Code 34773
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) HISTORIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2021

Transaction ID : A-23081

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WOODS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7125 INDIAN GRASS ROAD

City SAINT CLOUD	State FL	Zip Code 34773
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) HISTORIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2021

Transaction ID : A-23080

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 357 OF 525
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WOOLRIDGE, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8184 ANTIETAM DR
 City LEWISBERRY State PA Zip Code 17339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2021
Transaction ID : A-23092
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOOLRIDGE, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8184 ANTIETAM DR
 City LEWISBERRY State PA Zip Code 17339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2021
Transaction ID : A-23091
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WOOLRIDGE, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8184 ANTIETAM DR
 City LEWISBERRY State PA Zip Code 17339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2021
Transaction ID : A-23090
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 358 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WOOLRIDGE, DALE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2021
Mailing Address 8184 ANTIETAM DR		Transaction ID : A-23089
City LEWISBERRY	State PA	Zip Code 17339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WOOLRIDGE, DALE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2021
Mailing Address 8184 ANTIETAM DR		Transaction ID : A-23088
City LEWISBERRY	State PA	Zip Code 17339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WOOLRIDGE, DALE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 04 / 2021
Mailing Address 8184 ANTIETAM DR		Transaction ID : A-23087
City LEWISBERRY	State PA	Zip Code 17339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 OF 525
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. WOOLRIDGE, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8184 ANTIETAM DR
 City LEWISBERRY State PA Zip Code 17339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt **12 / 25 / 2021**
Transaction ID : A-23086
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZEHNDER, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5502 HIDDEN ROAD
 City LOUISVILLE State KY Zip Code 40291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) NONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.75

Date of Receipt **10 / 01 / 2021**
Transaction ID : A-23174
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. ZEHNDER, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5502 HIDDEN ROAD
 City LOUISVILLE State KY Zip Code 40291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) NONE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.75

Date of Receipt **11 / 01 / 2021**
Transaction ID : A-23173
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 360 OF 525
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZEHNDER, ANDREW, , ,

Mailing Address **5502 HIDDEN ROAD**

City LOUISVILLE	State KY	Zip Code 40291
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) NONE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.75

Date of Receipt
12 / 01 / 2021

Transaction ID : A-23172

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5.00
TOTAL This Period (last page this line number only).....▶	51533.13

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. 4IMPRINT INC

Full Name (Last, First, Middle Initial)

Mailing Address 101 COMMERCE ST

City OSHKOSH State WI Zip Code 54901

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 19 / 2021

FEC Identification Number: C

Transaction ID : B-23707

Amount of Each Disbursement this Period: 146.29

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 8400 PENA BLVD
SUITE 492134

City DENVER State CO Zip Code 80249

Purpose of Disbursement
COMMERCIAL AIRFARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 08 / 2021

FEC Identification Number: C

Transaction ID : B-23397

Amount of Each Disbursement this Period: 146.28

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 8400 PENA BLVD
SUITE 492134

City DENVER State CO Zip Code 80249

Purpose of Disbursement
COMMERCIAL AIRFARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 08 / 2021

FEC Identification Number: C

Transaction ID : B-23398

Amount of Each Disbursement this Period: 867.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1159.97

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 555 HILTON AVENUE
SUITE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 31 / 2021

FEC Identification Number

C

Transaction ID : B-23918

Amount of Each Disbursement this Period

6653.53

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-23716

Amount of Each Disbursement this Period

219.89

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-23717

Amount of Each Disbursement this Period

199.16

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7072.58

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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-23718

Amount of Each Disbursement this Period

11.34

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2021

FEC Identification Number

C

Transaction ID : B-23719

Amount of Each Disbursement this Period

30.99

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2021

FEC Identification Number

C

Transaction ID : B-23720

Amount of Each Disbursement this Period

15.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

57.58

**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. AOP PLUS

Full Name (Last, First, Middle Initial)

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 27 / 2021

FEC Identification Number: C

Transaction ID : B-23721

Amount of Each Disbursement this Period: 15.25

Memo Item

B. AOP PLUS

Full Name (Last, First, Middle Initial)

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 01 / 2021

FEC Identification Number: C

Transaction ID : B-23722

Amount of Each Disbursement this Period: 13.59

Memo Item

C. AOP PLUS

Full Name (Last, First, Middle Initial)

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 05 / 2021

FEC Identification Number: C

Transaction ID : B-23723

Amount of Each Disbursement this Period: 40.32

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 69.16

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2021

FEC Identification Number

C []

Transaction ID : B-23724

Amount of Each Disbursement this Period

[] 78.88

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2021

FEC Identification Number

C []

Transaction ID : B-23725

Amount of Each Disbursement this Period

[] 13.59

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2021

FEC Identification Number

C []

Transaction ID : B-23726

Amount of Each Disbursement this Period

[] 30.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 123.46

[]

**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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

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 : B-23727
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

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 : B-23728
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

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 : B-23729
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)
MISES PAC

Full Name (Last, First, Middle Initial)

A. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2021

FEC Identification Number

C

Transaction ID : B-23730

Amount of Each Disbursement this Period

17.95

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2021

FEC Identification Number

C

Transaction ID : B-23731

Amount of Each Disbursement this Period

23.67

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2021

FEC Identification Number

C

Transaction ID : B-23732

Amount of Each Disbursement this Period

71.09

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

112.71

**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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23733

Amount of Each Disbursement this Period

[REDACTED] 27.16

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 29 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23734

Amount of Each Disbursement this Period

[REDACTED] 36.57

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 29 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23735

Amount of Each Disbursement this Period

[REDACTED] 56.57

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 120.30

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. AOP PLUS

Full Name (Last, First, Middle Initial)

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2021

FEC Identification Number: C

Transaction ID : B-23736

Amount of Each Disbursement this Period: 38.19

Memo Item

B. AOP PLUS

Full Name (Last, First, Middle Initial)

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2021

FEC Identification Number: C

Transaction ID : B-23737

Amount of Each Disbursement this Period: 13.59

Memo Item

C. AOP PLUS

Full Name (Last, First, Middle Initial)

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2021

FEC Identification Number: C

Transaction ID : B-23738

Amount of Each Disbursement this Period: 70.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 122.76

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2021

FEC Identification Number

C

Transaction ID : B-23739

Amount of Each Disbursement this Period

90.30

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2021

FEC Identification Number

C

Transaction ID : B-23740

Amount of Each Disbursement this Period

13.59

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2021

FEC Identification Number

C

Transaction ID : B-23741

Amount of Each Disbursement this Period

18.09

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

121.98

**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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 02 / 2021

FEC Identification Number

C

Transaction ID : B-23742

Amount of Each Disbursement this Period

56.41

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 03 / 2021

FEC Identification Number

C

Transaction ID : B-23743

Amount of Each Disbursement this Period

13.59

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 03 / 2021

FEC Identification Number

C

Transaction ID : B-23744

Amount of Each Disbursement this Period

13.59

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

83.59

**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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23745

Amount of Each Disbursement this Period

[REDACTED] 15.64

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23746

Amount of Each Disbursement this Period

[REDACTED] 18.09

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23747

Amount of Each Disbursement this Period

[REDACTED] 43.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 77.28

[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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-23748

Amount of Each Disbursement this Period

157.51

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-23749

Amount of Each Disbursement this Period

15.64

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-23750

Amount of Each Disbursement this Period

13.59

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

186.74

**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. AOP PLUS		Date of Disbursement MM / DD / YYYY 12 / 07 / 2021
Mailing Address 7 CORONATION ROAD DEPHNA HOUSE		FEC Identification Number C [REDACTED] Transaction ID : B-23751 Amount of Each Disbursement this Period [REDACTED] 13.59
City LONDON GB	State DC	Zip Code 20000
Purpose of Disbursement PRINTING		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. AOP PLUS		Date of Disbursement MM / DD / YYYY 12 / 09 / 2021
Mailing Address 7 CORONATION ROAD DEPHNA HOUSE		FEC Identification Number C [REDACTED] Transaction ID : B-23752 Amount of Each Disbursement this Period [REDACTED] 15.18
City LONDON GB	State DC	Zip Code 20000
Purpose of Disbursement PRINTING		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AOP PLUS		Date of Disbursement MM / DD / YYYY 12 / 10 / 2021
Mailing Address 7 CORONATION ROAD DEPHNA HOUSE		FEC Identification Number C [REDACTED] Transaction ID : B-23753 Amount of Each Disbursement this Period [REDACTED] 10.45
City LONDON GB	State DC	Zip Code 20000
Purpose of Disbursement PRINTING		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 39.22
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2021

FEC Identification Number

C

Transaction ID : B-23754

Amount of Each Disbursement this Period

31.68

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2021

FEC Identification Number

C

Transaction ID : B-23755

Amount of Each Disbursement this Period

59.53

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2021

FEC Identification Number

C

Transaction ID : B-23756

Amount of Each Disbursement this Period

21.42

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

112.63

**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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 13 / 2021

FEC Identification Number

C

Transaction ID : B-23757

Amount of Each Disbursement this Period

192.06

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 13 / 2021

FEC Identification Number

C

Transaction ID : B-23758

Amount of Each Disbursement this Period

79.02

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 13 / 2021

FEC Identification Number

C

Transaction ID : B-23759

Amount of Each Disbursement this Period

28.17

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

299.25

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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 14 / 2021

FEC Identification Number

C

Transaction ID : B-23760
Amount of Each Disbursement this Period

38.61

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2021

FEC Identification Number

C

Transaction ID : B-23761
Amount of Each Disbursement this Period

107.34

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2021

FEC Identification Number

C

Transaction ID : B-23762
Amount of Each Disbursement this Period

13.59

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

159.54

**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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23763

Amount of Each Disbursement this Period

[REDACTED] 23.23

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 16 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23764

Amount of Each Disbursement this Period

[REDACTED] 44.58

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 20 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23765

Amount of Each Disbursement this Period

[REDACTED] 15.18

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 82.99

[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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2021

FEC Identification Number

C

Transaction ID : B-23766

Amount of Each Disbursement this Period

15.18

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2021

FEC Identification Number

C

Transaction ID : B-23767

Amount of Each Disbursement this Period

13.59

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2021

FEC Identification Number

C

Transaction ID : B-23768

Amount of Each Disbursement this Period

11.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.47

**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. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 23 / 2021

FEC Identification Number

C

Transaction ID : B-23769

Amount of Each Disbursement this Period

13.59

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 24 / 2021

FEC Identification Number

C

Transaction ID : B-23770

Amount of Each Disbursement this Period

38.19

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 27 / 2021

FEC Identification Number

C

Transaction ID : B-23771

Amount of Each Disbursement this Period

13.59

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

65.37

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 27 / 2021

FEC Identification Number

C

Transaction ID : B-23772

Amount of Each Disbursement this Period

23.67

Memo Item

Full Name (Last, First, Middle Initial)

B. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 29 / 2021

FEC Identification Number

C

Transaction ID : B-23773

Amount of Each Disbursement this Period

38.19

Memo Item

Full Name (Last, First, Middle Initial)

C. AOP PLUS

Mailing Address 7 CORONATION ROAD
DEPHNA HOUSE

City LONDON GB State DC Zip Code 20000

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2021

FEC Identification Number

C

Transaction ID : B-23774

Amount of Each Disbursement this Period

43.81

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

105.67

**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. APOGEE BOOS		Date of Disbursement MM / DD / YYYY 10 / 11 / 2021
Mailing Address 1440 GRAHAMS LANE UNIT 2		FEC Identification Number C [REDACTED] Transaction ID : B-23957 Amount of Each Disbursement this Period [REDACTED] 280.00
City BURLINGTON ONT	State DC	Zip Code 20000
Purpose of Disbursement OFFICE SUPPLIES		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. BEST WESTERN		Date of Disbursement MM / DD / YYYY 10 / 12 / 2021
Mailing Address 20400 N. 29TH AVE		FEC Identification Number C [REDACTED] Transaction ID : B-23776 Amount of Each Disbursement this Period [REDACTED] 406.07
City PHOENIX	State AZ	Zip Code 85027
Purpose of Disbursement HOTEL LODGING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BLUE BEE PRINTING		Date of Disbursement MM / DD / YYYY 07 / 12 / 2021
Mailing Address 320 VALLEY DR		FEC Identification Number C [REDACTED] Transaction ID : B-23784 Amount of Each Disbursement this Period [REDACTED] 259.92
City BRISBANE	State CA	Zip Code 94005
Purpose of Disbursement PRINTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 945.99
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. BROWN, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 08 / 17 / 2021	
Mailing Address 128 CRESS DRIVE		FEC Identification Number C [REDACTED]	
City EFFORT	State PA	Zip Code 18330	Transaction ID : B-23958
Purpose of Disbursement FILMOGRAPHER		Category/ Type	Amount of Each Disbursement this Period 900.00
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. BROWN, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 09 / 24 / 2021	
Mailing Address 128 CRESS DRIVE		FEC Identification Number C [REDACTED]	
City EFFORT	State PA	Zip Code 18330	Transaction ID : B-23959
Purpose of Disbursement FILMOGRAPHER		Category/ Type	Amount of Each Disbursement this Period 600.00
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. BROWN, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 09 / 24 / 2021	
Mailing Address 128 CRESS DRIVE		FEC Identification Number C [REDACTED]	
City EFFORT	State PA	Zip Code 18330	Transaction ID : B-23960
Purpose of Disbursement FILMOGRAPHER		Category/ Type	Amount of Each Disbursement this Period 150.00
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)..... ▶

1650.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)
A. CSLAFTER@MAC.COM

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	2	1

Mailing Address

City

State

Zip Code

Purpose of Disbursement
SOFTWARE

C

FEC Identification Number

C

Transaction ID : B-23928

Amount of Each Disbursement this Period

1	0	5	0	0	0
---	---	---	---	---	---

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)
B. DAVIS, WHITNEY, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	1

Mailing Address 221 1ST ST
UNIT 408

City
KIRKLAND

State
WA

Zip Code
98033

Purpose of Disbursement
EMPLOYEE SALARY

C

FEC Identification Number

C

Transaction ID : B-23964

Amount of Each Disbursement this Period

4	0	0	0	0	0
---	---	---	---	---	---

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)
C. DAVIS, WHITNEY, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	2	1

Mailing Address 221 1ST ST
UNIT 408

City
KIRKLAND

State
WA

Zip Code
98033

Purpose of Disbursement
EMPLOYEE SALARY

C

FEC Identification Number

C

Transaction ID : B-23963

Amount of Each Disbursement this Period

8	0	0	0	0	0
---	---	---	---	---	---

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

2	2	5	0	0	0
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

2	2	5	0	0	0
---	---	---	---	---	---

**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. DOMAIN 6 INC.

Full Name (Last, First, Middle Initial)

Mailing Address 3600136TH PLACE

City BELLEVUE State WA Zip Code 98006

Purpose of Disbursement INTERNET EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2021

FEC Identification Number: C

Transaction ID : B-23925

Amount of Each Disbursement this Period: 2649.00

Memo Item

B. DOURBLETREE BOSTON

Full Name (Last, First, Middle Initial)

Mailing Address 821 WASHINGTON ST

City BOSTON State MA Zip Code 02111

Purpose of Disbursement LEDGING HOTEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 07 / 2021

FEC Identification Number: C

Transaction ID : B-23790

Amount of Each Disbursement this Period: 513.86

Memo Item

C. DRIP.COM

Full Name (Last, First, Middle Initial)

Mailing Address 251 N. 1ST AVENUE SUITE 400

City MINNEAPOLIS State MN Zip Code 55401

Purpose of Disbursement E-MAIL MARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2021

FEC Identification Number: C

Transaction ID : B-23399

Amount of Each Disbursement this Period: 326.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3489.34

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. DRIP.COM		Date of Disbursement MM / DD / YYYY 08 / 11 / 2021
Mailing Address 251 N. 1ST AVENUE SUITE 400		FEC Identification Number C [] Transaction ID : B-23400 Amount of Each Disbursement this Period [] 326.48
City MINNEAPOLIS	State MN	Zip Code 55401
Purpose of Disbursement E-MAIL MARKETING		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. DRIP.COM		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021
Mailing Address 251 N. 1ST AVENUE SUITE 400		FEC Identification Number C [] Transaction ID : B-23401 Amount of Each Disbursement this Period [] 326.48
City MINNEAPOLIS	State MN	Zip Code 55401
Purpose of Disbursement E-MAIL MARKETING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DRIP.COM		Date of Disbursement MM / DD / YYYY 10 / 12 / 2021
Mailing Address 251 N. 1ST AVENUE SUITE 400		FEC Identification Number C [] Transaction ID : B-23402 Amount of Each Disbursement this Period [] 326.48
City MINNEAPOLIS	State MN	Zip Code 55401
Purpose of Disbursement E-MAIL MARKETING		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)..... ▶

979.44

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

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

Full Name (Last, First, Middle Initial) A. DRIP.COM		Date of Disbursement MM / DD / YYYY 11 / 12 / 2021
Mailing Address 251 N. 1ST AVENUE SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : B-23403 Amount of Each Disbursement this Period [REDACTED] 326.48
City MINNEAPOLIS	State MN	Zip Code 55401
Purpose of Disbursement E-MAIL MARKETING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DRIP.COM		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021
Mailing Address 251 N. 1ST AVENUE SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : B-23404 Amount of Each Disbursement this Period [REDACTED] 326.48
City MINNEAPOLIS	State MN	Zip Code 55401
Purpose of Disbursement E-MAIL MARKETING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 08 / 18 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B-23796 Amount of Each Disbursement this Period [REDACTED] 101.96
City BOSTON	State MA	Zip Code 01803
Purpose of Disbursement WEB HOSTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 754.92
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021	
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C [REDACTED]	
City BOSTON	State MA	Zip Code 01803	Transaction ID : B-23797
Purpose of Disbursement WEB HOSTING		Category/ Type [REDACTED]	Amount of Each Disbursement this Period [REDACTED] 215.90
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. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 08 / 25 / 2021	
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C [REDACTED]	
City BOSTON	State MA	Zip Code 01803	Transaction ID : B-23798
Purpose of Disbursement WEB HOSTING		Category/ Type [REDACTED]	Amount of Each Disbursement this Period [REDACTED] 35.98
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. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 10 / 01 / 2021	
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C [REDACTED]	
City BOSTON	State MA	Zip Code 01803	Transaction ID : B-23799
Purpose of Disbursement WEB HOSTING		Category/ Type [REDACTED]	Amount of Each Disbursement this Period [REDACTED] 33.99
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)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 285.87
[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. EIG BLUEHOST.COM		Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 04 / 2021	
Mailing Address 10 CORPORATE DRIVE			
City BOSTON	State MA	Zip Code 01803	
Purpose of Disbursement WEB HOSTING		FEC Identification Number C	
Candidate Name		Transaction ID : B-23800 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		

Full Name (Last, First, Middle Initial) B. EIG BLUEHOST.COM		Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 12 / 2021	
Mailing Address 10 CORPORATE DRIVE			
City BOSTON	State MA	Zip Code 01803	
Purpose of Disbursement WEB HOSTING		FEC Identification Number C	
Candidate Name		Transaction ID : B-23801 Amount of Each Disbursement this Period 75.96	
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. EIG BLUEHOST.COM		Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 18 / 2021	
Mailing Address 10 CORPORATE DRIVE			
City BOSTON	State MA	Zip Code 01803	
Purpose of Disbursement WEB HOSTING		FEC Identification Number C	
Candidate Name		Transaction ID : B-23802 Amount of Each Disbursement this Period 18.99	
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).....	112.94
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 11 / 08 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C [] Transaction ID : B-23803 Amount of Each Disbursement this Period [] 165.94
City BOSTON	State MA	Zip Code 01803
Purpose of Disbursement WEB HOSTING		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. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 11 / 08 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C [] Transaction ID : B-23804 Amount of Each Disbursement this Period [] 59.98
City BOSTON	State MA	Zip Code 01803
Purpose of Disbursement WEB HOSTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 11 / 08 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C [] Transaction ID : B-23805 Amount of Each Disbursement this Period [] 151.87
City BOSTON	State MA	Zip Code 01803
Purpose of Disbursement WEB HOSTING		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)..... ▶

[] 377.79

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 11 / 29 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C Transaction ID : B-23806 Amount of Each Disbursement this Period 67.98
City BOSTON	State MA	
Purpose of Disbursement WEB HOSTING		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) B. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 12 / 07 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C Transaction ID : B-23807 Amount of Each Disbursement this Period 67.98
City BOSTON	State MA	
Purpose of Disbursement WEB HOSTING		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. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 12 / 16 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C Transaction ID : B-23808 Amount of Each Disbursement this Period 52.98
City BOSTON	State MA	
Purpose of Disbursement WEB HOSTING		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).....▶	188.94
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 12 / 21 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C Transaction ID : B-23809 Amount of Each Disbursement this Period 37.98
City BOSTON	State MA	
Purpose of Disbursement WEB HOSTING		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) B. EIG BLUEHOST.COM		Date of Disbursement MM / DD / YYYY 12 / 27 / 2021
Mailing Address 10 CORPORATE DRIVE		FEC Identification Number C Transaction ID : B-23810 Amount of Each Disbursement this Period 18.99
City BOSTON	State MA	
Purpose of Disbursement WEB HOSTING		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. ELECT DON JOHNSON		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021
Mailing Address 160 WINTER DRIVE		FEC Identification Number C Transaction ID : B-23711 Amount of Each Disbursement this Period 1041.67
City SUMMERVILLE	State SC	
Purpose of Disbursement EVENT EXPENSE		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)..... ▶

1098.64

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. ENCORE GROUP USA		Date of Disbursement MM / DD / YYYY 10 / 05 / 2021
Mailing Address 23918 NETWORK PLACE		FEC Identification Number C [] Transaction ID : B-23812 Amount of Each Disbursement this Period [] 1272.58
City CHICAGO	State IL	Zip Code 60673
Purpose of Disbursement CONFERENCE PLANNING		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. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 08 / 25 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23817 Amount of Each Disbursement this Period [] 225.00
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23828 Amount of Each Disbursement this Period [] 45.00
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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).....▶	[] 1542.58
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 08 / 31 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23816
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		Amount of Each Disbursement this Period [] 45.00
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. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 11 / 08 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23818
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		Amount of Each Disbursement this Period [] 5.34
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. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 11 / 08 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23819
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		Amount of Each Disbursement this Period [] 47.70
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).....▶	[] 98.04
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 11 / 12 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23824 Amount of Each Disbursement this Period [] 47.70
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 11 / 12 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23825 Amount of Each Disbursement this Period [] 13.65
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 11 / 29 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23814 Amount of Each Disbursement this Period [] 47.70
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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).....▶	[] 109.05
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 11 / 29 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23815 Amount of Each Disbursement this Period [] 21.18
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 11 / 29 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23826 Amount of Each Disbursement this Period [] 47.70
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 11 / 29 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23827 Amount of Each Disbursement this Period [] 21.23
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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).....▶	[] 90.11
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 12 / 01 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23820 Amount of Each Disbursement this Period [] 47.70
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 12 / 01 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23821 Amount of Each Disbursement this Period [] 27.48
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 12 / 03 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23822 Amount of Each Disbursement this Period [] 47.70
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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).....▶	[] 122.88
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 12 / 03 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23823 Amount of Each Disbursement this Period [] 19.81
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 12 / 16 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23830 Amount of Each Disbursement this Period [] 47.70
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EZTEXTING.COM		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021
Mailing Address 1410 SECOND ST SUITE 200		FEC Identification Number C [] Transaction ID : B-23829 Amount of Each Disbursement this Period [] 498.63
City SANTA MONICA	State CA	Zip Code 90406
Purpose of Disbursement EXTEXTING/MARKETING		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).....▶	[] 566.14
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. FERRENBURG, ROCKY, , ,		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021
Mailing Address		FEC Identification Number C
City	State	
Purpose of Disbursement PAYMENT		Transaction ID : B-23966 Amount of Each Disbursement this Period 1000.00
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) B. FLOOD, PATRICK, , ,		Date of Disbursement MM / DD / YYYY 10 / 04 / 2021
Mailing Address		FEC Identification Number C
City	State	
Purpose of Disbursement PAYMENT		Transaction ID : B-23968 Amount of Each Disbursement this Period 500.00
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) C. GAYLORD		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021
Mailing Address 201 WATERFRONT ST		FEC Identification Number C
City	State	
Purpose of Disbursement LODGING-HOTEL		Transaction ID : B-23834 Amount of Each Disbursement this Period 293.00
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	1793.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. GEARBUBBLE.COM		Date of Disbursement MM / DD / YYYY 07 / 01 / 2021
Mailing Address 6440 SKY POINTE DR. #140-641		FEC Identification Number C [] Transaction ID : B-23405 Amount of Each Disbursement this Period [] 27.00
City LAS VEGAS	State NV	Zip Code 89131
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. GEARBUBBLE.COM		Date of Disbursement MM / DD / YYYY 08 / 02 / 2021
Mailing Address 6440 SKY POINTE DR. #140-641		FEC Identification Number C [] Transaction ID : B-23406 Amount of Each Disbursement this Period [] 27.00
City LAS VEGAS	State NV	Zip Code 89131
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GEARBUBBLE.COM		Date of Disbursement MM / DD / YYYY 09 / 01 / 2021
Mailing Address 6440 SKY POINTE DR. #140-641		FEC Identification Number C [] Transaction ID : B-23407 Amount of Each Disbursement this Period [] 27.00
City LAS VEGAS	State NV	Zip Code 89131
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 81.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GEARBUBBLE.COM

Full Name (Last, First, Middle Initial)

Mailing Address 6440 SKY POINTE DR.
#140-641

City LAS VEGAS State NV Zip Code 89131

Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 01 / 2021

FEC Identification Number: C

Transaction ID : B-23408

Amount of Each Disbursement this Period: 27.00

Memo Item

B. GETZ, JOEL, , , III

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 29 / 2021

FEC Identification Number: C

Transaction ID : B-23970

Amount of Each Disbursement this Period: 300.00

Memo Item

C. GOOGLE GSUITE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94040

Purpose of Disbursement E-MAIL SYSTEM

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 02 / 2021

FEC Identification Number: C

Transaction ID : B-23409

Amount of Each Disbursement this Period: 44.52

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 371.52

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)
MISES PAC

Full Name (Last, First, Middle Initial)

A. GOOGLE GSUITE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94040

Purpose of Disbursement
E-MAIL SYSTEM

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
0	8		0	3		2	0	2	1

FEC Identification Number

C []

Transaction ID : B-23413

Amount of Each Disbursement this Period

[] 44.52

Memo Item

Full Name (Last, First, Middle Initial)

B. GOOGLE GSUITE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94040

Purpose of Disbursement
E-MAIL SYSTEM

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
0	8		2	7		2	0	2	1

FEC Identification Number

C []

Transaction ID : B-23411

Amount of Each Disbursement this Period

[] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GOOGLE GSUITE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94040

Purpose of Disbursement
E-MAIL SYSTEM

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
0	9		0	2		2	0	2	1

FEC Identification Number

C []

Transaction ID : B-23412

Amount of Each Disbursement this Period

[] 44.52

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 114.04

TOTAL This Period (last page this line number only)..... ▶

[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. GOOGLE GSUITE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94040

Purpose of Disbursement E-MAIL SYSTEM

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 04 / 2021

FEC Identification Number: C

Transaction ID : B-23414

Amount of Each Disbursement this Period: 44.52

Memo Item

B. GOOGLE GSUITE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94040

Purpose of Disbursement E-MAIL SYSTEM

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2021

FEC Identification Number: C

Transaction ID : B-23415

Amount of Each Disbursement this Period: 44.52

Memo Item

C. GOOGLE GSUITE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94040

Purpose of Disbursement E-MAIL SYSTEM

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2021

FEC Identification Number: C

Transaction ID : B-23410

Amount of Each Disbursement this Period: 44.52

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 133.56

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. HAPPEARNER.COM		Date of Disbursement MM / DD / YYYY 10 / 28 / 2021
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement PAYMENT		Transaction ID : B-23930
Candidate Name		Amount of Each Disbursement this Period 320.00
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) B. HARRIS, AARON, , ,		Date of Disbursement MM / DD / YYYY 07 / 28 / 2021
Mailing Address 1100 GAINSBOROUGH ROAD		FEC Identification Number C
City DAYTON	State OH	Zip Code 45419
Purpose of Disbursement EMPLOYEE SALARY		Transaction ID : B-23972
Candidate Name		Amount of Each Disbursement this Period 400.00
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) C. HARRIS, AARON, , ,		Date of Disbursement MM / DD / YYYY 09 / 06 / 2021
Mailing Address 1100 GAINSBOROUGH ROAD		FEC Identification Number C
City DAYTON	State OH	Zip Code 45419
Purpose of Disbursement EMPLOYEE SALARY		Transaction ID : B-23971
Candidate Name		Amount of Each Disbursement this Period 800.00
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	1520.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. HEISE, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 450 FORREST AVENUE

City NORRISTOWN State PA Zip Code 19401

Purpose of Disbursement EMPLOYEESALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 16 / 2021

FEC Identification Number: C

Transaction ID : B-23973

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. HEISE, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 450 FORREST AVENUE

City NORRISTOWN State PA Zip Code 19401

Purpose of Disbursement EMPLOYEESALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2021

FEC Identification Number: C

Transaction ID : B-23979

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. HEISE, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 450 FORREST AVENUE

City NORRISTOWN State PA Zip Code 19401

Purpose of Disbursement EMPLOYEESALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 13 / 2021

FEC Identification Number: C

Transaction ID : B-23974

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. HEISE, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 09 / 11 / 2021
Mailing Address 450 FORREST AVENUE		FEC Identification Number C [] Transaction ID : B-23975 Amount of Each Disbursement this Period 5000.00
City NORRISTOWN	State PA	Zip Code 19401
Purpose of Disbursement EMPLOYEESALARY		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. HEISE, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 09 / 24 / 2021
Mailing Address 450 FORREST AVENUE		FEC Identification Number C [] Transaction ID : B-23976 Amount of Each Disbursement this Period 5000.00
City NORRISTOWN	State PA	Zip Code 19401
Purpose of Disbursement EMPLOYEESALARY		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. HEISE, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 10 / 12 / 2021
Mailing Address 450 FORREST AVENUE		FEC Identification Number C [] Transaction ID : B-23980 Amount of Each Disbursement this Period 350.00
City NORRISTOWN	State PA	Zip Code 19401
Purpose of Disbursement EVENT TABLE		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).....▶	10350.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. HEISE, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 11 / 01 / 2021	
Mailing Address 450 FORREST AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B-23977 Amount of Each Disbursement this Period 5000.00	
City NORRISTOWN	State PA	Zip Code 19401	Category/ Type
Purpose of Disbursement EMPLOYEESALARY			
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. HEISE, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 12 / 09 / 2021	
Mailing Address 450 FORREST AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B-23978 Amount of Each Disbursement this Period 2500.00	
City NORRISTOWN	State PA	Zip Code 19401	Category/ Type
Purpose of Disbursement EMPLOYEESALARY			
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. HILTON FAIRVIEW		Date of Disbursement MM / DD / YYYY 10 / 05 / 2021	
Mailing Address 7930 JONES BRANCH DR		FEC Identification Number C [REDACTED] Transaction ID : B-23836 Amount of Each Disbursement this Period 5000.00	
City MCLEAN	State VA	Zip Code 22102	Category/ Type
Purpose of Disbursement LODGING-HOTEL			
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)..... ▶

12500.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. HILTON FAIRVIEW		Date of Disbursement MM / DD / YYYY 10 / 06 / 2021
Mailing Address 7930 JONES BRANCH DR		FEC Identification Number C [REDACTED] Transaction ID : B-23837 Amount of Each Disbursement this Period [REDACTED] 1966.32
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement LODGING-HOTEL		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. HILTON FAIRVIEW		Date of Disbursement MM / DD / YYYY 10 / 13 / 2021
Mailing Address 7930 JONES BRANCH DR		FEC Identification Number C [REDACTED] Transaction ID : B-23838 Amount of Each Disbursement this Period [REDACTED] 2125.53
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement LODGING-HOTEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. HOLIDAY INN		Date of Disbursement MM / DD / YYYY 10 / 12 / 2021
Mailing Address 3 RAVINIA DRIVE SUITE 100		FEC Identification Number C [REDACTED] Transaction ID : B-23416 Amount of Each Disbursement this Period [REDACTED] 395.21
City ATLANTA	State GA	Zip Code 30346
Purpose of Disbursement LODGING-HOTEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 4487.06
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)
A. JOHN STAFFORD STANLEY JOHN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2021

Mailing Address

City State Zip Code

FEC Identification Number

C

Transaction ID : B-23842
Amount of Each Disbursement this Period

1500.00

Memo Item

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
B. LARRYOKE KARAOKE & DJ SERVICES LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2021

Mailing Address

City State Zip Code

FEC Identification Number

C

Transaction ID : B-23920
Amount of Each Disbursement this Period

630.00

Memo Item

Purpose of Disbursement
EVENT RXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)
C. LEIST, ROBERT, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2021

Mailing Address

City State Zip Code

FEC Identification Number

C

Transaction ID : B-23982
Amount of Each Disbursement this Period

1500.00

Memo Item

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3630.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LIBERTARIAN NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1444 DUKE ST

M M M	/	D D D	/	Y Y Y Y Y
12		22		2021

City
ALEXANDRIA

State
VA

Zip Code
22314

FEC Identification Number

Purpose of Disbursement
EVENT EXPENSE

C

Candidate Name

Category/
Type

Transaction ID : B-23846

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

499.00

State: District:

Memo Item

B. LVRG.COM

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1625 17TH ST, FL 3

M M M	/	D D D	/	Y Y Y Y Y
07		06		2021

City
DENVER

State
CO

Zip Code
80202

FEC Identification Number

Purpose of Disbursement
MANAGEMENT CONSULTING

C

Candidate Name

Category/
Type

Transaction ID : B-23420

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

30.00

State: District:

Memo Item

C. LVRG.COM

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1625 17TH ST, FL 3

M M M	/	D D D	/	Y Y Y Y Y
07		13		2021

City
DENVER

State
CO

Zip Code
80202

FEC Identification Number

Purpose of Disbursement
MANAGEMENT CONSULTING

C

Candidate Name

Category/
Type

Transaction ID : B-23418

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

30.00

State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

559.00

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)
MISES PAC

Full Name (Last, First, Middle Initial) A. LVRG.COM		Date of Disbursement MM / DD / YYYY 08 / 03 / 2021	
Mailing Address 1625 17TH ST, FL 3		FEC Identification Number C [] Transaction ID : B-23421 Amount of Each Disbursement this Period [] 30.00	
City DENVER	State CO	Zip Code 80202	Category/ Type []
Purpose of Disbursement MANAGEMENT CONSULTING		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. LVRG.COM		Date of Disbursement MM / DD / YYYY 08 / 13 / 2021	
Mailing Address 1625 17TH ST, FL 3		FEC Identification Number C [] Transaction ID : B-23419 Amount of Each Disbursement this Period [] 30.00	
City DENVER	State CO	Zip Code 80202	Category/ Type []
Purpose of Disbursement MANAGEMENT CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. LVRG.COM		Date of Disbursement MM / DD / YYYY 09 / 03 / 2021	
Mailing Address 1625 17TH ST, FL 3		FEC Identification Number C [] Transaction ID : B-23422 Amount of Each Disbursement this Period [] 30.00	
City DENVER	State CO	Zip Code 80202	Category/ Type []
Purpose of Disbursement MANAGEMENT CONSULTING		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).....▶	[] 90.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. LVRG.COM		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021
Mailing Address 1625 17TH ST, FL 3		FEC Identification Number C [] Transaction ID : B-23423 Amount of Each Disbursement this Period [] 30.00
City DENVER	State CO	Zip Code 80202
Purpose of Disbursement MANAGEMENT CONSULTING		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. LVRG.COM		Date of Disbursement MM / DD / YYYY 10 / 04 / 2021
Mailing Address 1625 17TH ST, FL 3		FEC Identification Number C [] Transaction ID : B-23424 Amount of Each Disbursement this Period [] 30.00
City DENVER	State CO	Zip Code 80202
Purpose of Disbursement MANAGEMENT CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. LVRG.COM		Date of Disbursement MM / DD / YYYY 10 / 13 / 2021
Mailing Address 1625 17TH ST, FL 3		FEC Identification Number C [] Transaction ID : B-23417 Amount of Each Disbursement this Period [] 30.00
City DENVER	State CO	Zip Code 80202
Purpose of Disbursement MANAGEMENT CONSULTING		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).....▶	[] 90.00
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LVRG.COM

Full Name (Last, First, Middle Initial)

Mailing Address 1625 17TH ST, FL 3

City DENVER State CO Zip Code 80202

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 10 / 13 / 2021

FEC Identification Number: C

Transaction ID : B-23425

Amount of Each Disbursement this Period: 97.00

Memo Item

B. LVRG.COM

Full Name (Last, First, Middle Initial)

Mailing Address 1625 17TH ST, FL 3

City DENVER State CO Zip Code 80202

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 11 / 03 / 2021

FEC Identification Number: C

Transaction ID : B-23426

Amount of Each Disbursement this Period: 30.00

Memo Item

C. LVRG.COM

Full Name (Last, First, Middle Initial)

Mailing Address 1625 17TH ST, FL 3

City DENVER State CO Zip Code 80202

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 11 / 15 / 2021

FEC Identification Number: C

Transaction ID : B-23427

Amount of Each Disbursement this Period: 30.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 157.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. LVRG.COM		Date of Disbursement MM / DD / YYYY 12 / 03 / 2021	
Mailing Address 1625 17TH ST, FL 3		FEC Identification Number C [REDACTED]	
City DENVER	State CO	Zip Code 80202	Transaction ID : B-23428
Purpose of Disbursement MANAGEMENT CONSULTING		Category/ Type	Amount of Each Disbursement this Period 30.00
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. LVRG.COM		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021	
Mailing Address 1625 17TH ST, FL 3		FEC Identification Number C [REDACTED]	
City DENVER	State CO	Zip Code 80202	Transaction ID : B-23429
Purpose of Disbursement MANAGEMENT CONSULTING		Category/ Type	Amount of Each Disbursement this Period 30.00
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. LYFT		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021	
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number C [REDACTED]	
City SAN FRANCISCO	State CA	Zip Code 94107	Transaction ID : B-23857
Purpose of Disbursement CAR SERVICE		Category/ Type	Amount of Each Disbursement this Period 106.89
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).....▶	166.89
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. LYFT

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

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 : B-23858
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. LYFT

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

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 : B-23863
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. LYFT

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

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 : B-23859
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)
MISES PAC

Full Name (Last, First, Middle Initial)

A. LYFT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	0		2	0	2	1		

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : B-23864

Amount of Each Disbursement this Period

127.34

Memo Item

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. LYFT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	4		2	0	2	1		

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : B-23860

Amount of Each Disbursement this Period

35.99

Memo Item

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. LYFT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	2		2	0	2	1		

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : B-23861

Amount of Each Disbursement this Period

24.82

Memo Item

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

188.15

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. LYFT

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23852

Amount of Each Disbursement this Period

[REDACTED] 25.99

Memo Item

Full Name (Last, First, Middle Initial)

B. LYFT

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 06 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23855

Amount of Each Disbursement this Period

[REDACTED] 72.80

Memo Item

Full Name (Last, First, Middle Initial)

C. LYFT

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CAR SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23854

Amount of Each Disbursement this Period

[REDACTED] 33.85

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 132.64

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. LYFT

Full Name (Last, First, Middle Initial)

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement CAR SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 13 / 2021

FEC Identification Number: C

Transaction ID : B-23853

Amount of Each Disbursement this Period: 90.51

Memo Item

B. MARRIOTT

Full Name (Last, First, Middle Initial)

Mailing Address 10400 FERNWOOD RD

City BETHSDA State MD Zip Code 20817

Purpose of Disbursement LODGING HOTEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 07 / 2021

FEC Identification Number: C

Transaction ID : B-23866

Amount of Each Disbursement this Period: 471.21

Memo Item

C. MCADAMS, DANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 29 / 2021

FEC Identification Number: C

Transaction ID : B-23987

Amount of Each Disbursement this Period: 340.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 901.72

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MIKE TER MAAT CAMPAIGN INCORPORATED

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 813517

City HOLLYWOOD State FL Zip Code 33081

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 29 / 2021

FEC Identification Number: C

Transaction ID : B-23923

Amount of Each Disbursement this Period: 498.00

Memo Item

B. MISCELLANEOUS EXPENSE5

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement PAYMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2021

FEC Identification Number: C

Transaction ID : B-23938

Amount of Each Disbursement this Period: 324.70

Memo Item

C. MISCELLANEOUS EXPENSE6

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement PAYMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 08 / 2021

FEC Identification Number: C

Transaction ID : B-23940

Amount of Each Disbursement this Period: 277.32

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1100.02

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. MISCELLANEOUS EXPENSE7

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y
12		14		2021

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement
PAYMENT

C

Candidate Name

Category/
Type

Transaction ID : B-23942

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

263.84

State: District:

Memo Item

B. Misko, Amy, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 6830 CANAL BLVD.

M M M	/	D D D	/	Y Y Y Y Y
09		11		2021

City
NEW ORLEANS

State
LA

Zip Code
70124

FEC Identification Number

Purpose of Disbursement
POLITICAL CONTRIBUTION

C

Candidate Name

Category/
Type

Transaction ID : B-23988

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

1500.00

State: District:

Memo Item

C. Newman, Patrick, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y
08		06		2021

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement
PAYMENT

C

Candidate Name

Category/
Type

Transaction ID : B-23990

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

430.00

State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2193.84

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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)
MISES PAC

Full Name (Last, First, Middle Initial)
A. OFFICE DEPOT

Mailing Address 6600 N MILITARY TRL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 06 / 2021

FEC Identification Number C
Transaction ID : B-23431
Amount of Each Disbursement this Period 115.73

Memo Item

Full Name (Last, First, Middle Initial)
B. OFFICE DEPOT

Mailing Address 6600 N MILITARY TRL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 09 / 2021

FEC Identification Number C
Transaction ID : B-23434
Amount of Each Disbursement this Period 260.76

Memo Item

Full Name (Last, First, Middle Initial)
C. OFFICE DEPOT

Mailing Address 6600 N MILITARY TRL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 22 / 2021

FEC Identification Number C
Transaction ID : B-23432
Amount of Each Disbursement this Period 322.39

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 698.88

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement MM / DD / YYYY 10 / 05 / 2021
Mailing Address 6600 N MILITARY TRL		FEC Identification Number C [REDACTED] Transaction ID : B-23433 Amount of Each Disbursement this Period [REDACTED] 172.67
City BOCA RATON	State FL	Zip Code 33496
Purpose of Disbursement EVENT MATERIALS		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. OFFICE DEPOT		Date of Disbursement MM / DD / YYYY 11 / 15 / 2021
Mailing Address 6600 N MILITARY TRL		FEC Identification Number C [REDACTED] Transaction ID : B-23430 Amount of Each Disbursement this Period [REDACTED] 141.63
City BOCA RATON	State FL	Zip Code 33496
Purpose of Disbursement EVENT MATERIALS		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. OFFICE MAX		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021
Mailing Address 263 SHUMAN BLVD		FEC Identification Number C [REDACTED] Transaction ID : B-23436 Amount of Each Disbursement this Period [REDACTED] 337.01
City NAPERVILLE	State IL	Zip Code 60563
Purpose of Disbursement EVENT MATERIALS		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 651.31
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. OFFICE MAX		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021
Mailing Address 263 SHUMAN BLVD		FEC Identification Number C [] Transaction ID : B-23437 Amount of Each Disbursement this Period [] 39.38
City NAPERVILLE	State IL	Zip Code 60563
Purpose of Disbursement EVENT MATERIALS		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. OFFICE MAX		Date of Disbursement MM / DD / YYYY 11 / 05 / 2021
Mailing Address 263 SHUMAN BLVD		FEC Identification Number C [] Transaction ID : B-23435 Amount of Each Disbursement this Period [] 19.61
City NAPERVILLE	State IL	Zip Code 60563
Purpose of Disbursement EVENT MATERIALS		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PEREZ, LOU, , ,		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021
Mailing Address		FEC Identification Number C [] Transaction ID : B-23992 Amount of Each Disbursement this Period [] 2235.00
City	State	Zip Code
Purpose of Disbursement EVENT EXPENSE		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).....▶	[] 2293.99
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PEREZ, LOU, , ,		Date of Disbursement MM / DD / YYYY 10 / 04 / 2021
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement EVENT EXPENSE		Transaction ID : B-23993
Candidate Name		Amount of Each Disbursement this Period 156.11
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 08 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Transaction ID : B-23462
Candidate Name		Amount of Each Disbursement this Period 5.72
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 08 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Transaction ID : B-23552
Candidate Name		Amount of Each Disbursement this Period 16.86
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).....▶	178.69
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23540 Amount of Each Disbursement this Period [] 33.09	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23596 Amount of Each Disbursement this Period [] 22.66	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23603 Amount of Each Disbursement this Period [] 16.29	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 72.04
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 09 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23610 Amount of Each Disbursement this Period [] 19.54
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 09 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23626 Amount of Each Disbursement this Period [] 16.29
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 12 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23497 Amount of Each Disbursement this Period [] 38.35
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 74.18
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 12 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23498 Amount of Each Disbursement this Period [REDACTED] 17.32	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23585 Amount of Each Disbursement this Period [REDACTED] 20.72	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 14 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23499 Amount of Each Disbursement this Period [REDACTED] 20.10	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 58.14
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 14 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23532	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 19.14
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 14 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23660	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 38.28
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 14 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23661	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 17.76
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 75.18
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 15 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23487 Amount of Each Disbursement this Period [REDACTED] 17.79
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23544 Amount of Each Disbursement this Period [REDACTED] 38.57
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 19 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23463 Amount of Each Disbursement this Period [REDACTED] 16.29
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 72.65
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 19 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23500 Amount of Each Disbursement this Period [REDACTED] 25.69	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 19 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23509 Amount of Each Disbursement this Period [REDACTED] 17.59	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 20 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23516 Amount of Each Disbursement this Period [REDACTED] 26.48	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 69.76
[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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 20 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23615 Amount of Each Disbursement this Period [] 56.29	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 26 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23597 Amount of Each Disbursement this Period [] 16.29	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 28 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23573 Amount of Each Disbursement this Period [] 20.18	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 92.49
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 29 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23479	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 16.86
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 29 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23638	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 37.60
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 07 / 30 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23684	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 16.29
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 70.75
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. PRINTFUL, INC

Mailing Address 11025 WESTLAKE DR

City
CHARLOTTE

State
NC

Zip Code
28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

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
0	8		0	2		2	0	2	1

FEC Identification Number

C []

Transaction ID : B-23522

Amount of Each Disbursement this Period

[] 17.63

Memo Item

Full Name (Last, First, Middle Initial)

B. PRINTFUL, INC

Mailing Address 11025 WESTLAKE DR

City
CHARLOTTE

State
NC

Zip Code
28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

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
0	8		0	2		2	0	2	1

FEC Identification Number

C []

Transaction ID : B-23553

Amount of Each Disbursement this Period

[] 20.30

Memo Item

Full Name (Last, First, Middle Initial)

C. PRINTFUL, INC

Mailing Address 11025 WESTLAKE DR

City
CHARLOTTE

State
NC

Zip Code
28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

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
0	8		0	2		2	0	2	1

FEC Identification Number

C []

Transaction ID : B-23616

Amount of Each Disbursement this Period

[] 18.08

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 56.01

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)
A. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
08 / 02 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23639
Amount of Each Disbursement this Period
16.81

Memo Item

Full Name (Last, First, Middle Initial)
B. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
08 / 02 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23665
Amount of Each Disbursement this Period
5.78

Memo Item

Full Name (Last, First, Middle Initial)
C. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
08 / 03 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23445
Amount of Each Disbursement this Period
20.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 42.84

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 05 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23559 Amount of Each Disbursement this Period [REDACTED] 20.37	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 05 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23685 Amount of Each Disbursement this Period [REDACTED] 32.50	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23438 Amount of Each Disbursement this Period [REDACTED] 19.12	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 71.99
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23453 Amount of Each Disbursement this Period [REDACTED] 37.02	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23480 Amount of Each Disbursement this Period [REDACTED] 19.78	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23483 Amount of Each Disbursement this Period [REDACTED] 43.91	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 100.71
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23501 Amount of Each Disbursement this Period [] 5.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23523 Amount of Each Disbursement this Period [] 19.47	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23536 Amount of Each Disbursement this Period [] 18.44	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

43.85

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23545 Amount of Each Disbursement this Period [REDACTED] 16.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23586 Amount of Each Disbursement this Period [REDACTED] 41.50	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23587 Amount of Each Disbursement this Period [REDACTED] 55.70	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 114.14
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23640	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 5.89
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 10 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23464	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 5.64
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 10 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23495	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 35.01
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 46.54
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 10 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23510
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 21.25
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 10 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23692
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 18.71
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 11 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23470
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 32.96
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)..... ▶

72.92

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 12 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23471
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 5.83
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 12 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23576
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 19.94
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 12 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23588
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 5.85
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 31.62
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 12 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23635 Amount of Each Disbursement this Period [] 23.53	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23554 Amount of Each Disbursement this Period [] 19.44	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23617 Amount of Each Disbursement this Period [] 20.73	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 63.70
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23631
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 6.20
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23472
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 59.44
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23488
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 21.34
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).....▶	[REDACTED] 86.98
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23489 Amount of Each Disbursement this Period [] 18.86	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23502 Amount of Each Disbursement this Period [] 37.64	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23537 Amount of Each Disbursement this Period [] 57.71	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 114.21
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23560 Amount of Each Disbursement this Period [] 32.50	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23567 Amount of Each Disbursement this Period [] 21.69	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23601 Amount of Each Disbursement this Period [] 18.21	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 72.40
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23618 Amount of Each Disbursement this Period [] 34.88
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23632 Amount of Each Disbursement this Period [] 16.94
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23652 Amount of Each Disbursement this Period [] 16.79
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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)..... ▶

68.61

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23653 Amount of Each Disbursement this Period [] 20.15	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23674 Amount of Each Disbursement this Period [] 21.59	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23675 Amount of Each Disbursement this Period [] 19.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 61.68
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23686 Amount of Each Disbursement this Period [] 31.74
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 17 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23473 Amount of Each Disbursement this Period [] 56.13
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 19 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23555 Amount of Each Disbursement this Period [] 19.28
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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)..... ▶

[] 107.15

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 20 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23459 Amount of Each Disbursement this Period [] 16.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 20 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23511 Amount of Each Disbursement this Period [] 26.18	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 20 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23598 Amount of Each Disbursement this Period [] 34.45	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 77.57
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 20 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23627
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 5.84
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 20 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23641
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 32.50
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 20 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23676
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 44.18
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 82.52
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)
MISES PAC

Full Name (Last, First, Middle Initial)
A. PRINTFUL, INC

Date of Disbursement: MM / DD / YYYY
08 / 23 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : B-23454
Amount of Each Disbursement this Period: 18.13

Memo Item

Full Name (Last, First, Middle Initial)
B. PRINTFUL, INC

Date of Disbursement: MM / DD / YYYY
08 / 23 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : B-23465
Amount of Each Disbursement this Period: 32.50

Memo Item

Full Name (Last, First, Middle Initial)
C. PRINTFUL, INC

Date of Disbursement: MM / DD / YYYY
08 / 23 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : B-23484
Amount of Each Disbursement this Period: 19.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 70.57

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23490 Amount of Each Disbursement this Period [REDACTED] 50.11	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23503 Amount of Each Disbursement this Period [REDACTED] 34.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23512 Amount of Each Disbursement this Period [REDACTED] 16.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 101.99
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. PRINTFUL, INC

Full Name (Last, First, Middle Initial)

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 23 / 2021

FEC Identification Number: C

Transaction ID : B-23513

Amount of Each Disbursement this Period: 18.99

Memo Item

B. PRINTFUL, INC

Full Name (Last, First, Middle Initial)

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 23 / 2021

FEC Identification Number: C

Transaction ID : B-23517

Amount of Each Disbursement this Period: 33.87

Memo Item

C. PRINTFUL, INC

Full Name (Last, First, Middle Initial)

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 23 / 2021

FEC Identification Number: C

Transaction ID : B-23533

Amount of Each Disbursement this Period: 19.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 72.49

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23546 Amount of Each Disbursement this Period [] 5.85
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23561 Amount of Each Disbursement this Period [] 18.77
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23568 Amount of Each Disbursement this Period [] 35.51
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 60.13
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23574	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 19.49
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23589	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 18.72
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23599	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 24.04
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 62.25
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23604 Amount of Each Disbursement this Period [] 36.48
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23619 Amount of Each Disbursement this Period [] 75.58
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23654 Amount of Each Disbursement this Period [] 19.63
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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)..... ▶

[] 131.69

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23677
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 64.07
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23687
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 24.83
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23688
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 21.40
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 110.30
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23439 Amount of Each Disbursement this Period [] 26.50
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23455 Amount of Each Disbursement this Period [] 19.23
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23456 Amount of Each Disbursement this Period [] 34.70
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 80.43
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23466 Amount of Each Disbursement this Period [REDACTED] 41.18	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23528 Amount of Each Disbursement this Period [REDACTED] 16.99	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23547 Amount of Each Disbursement this Period [REDACTED] 25.13	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 83.30
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23590
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 16.94
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23662
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 6.03
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 25 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23474
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 18.59
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).....▶	[REDACTED] 41.56
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 25 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23541 Amount of Each Disbursement this Period [] 16.99
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 25 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23620 Amount of Each Disbursement this Period [] 16.94
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 25 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23689 Amount of Each Disbursement this Period [] 18.35
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 52.28
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 25 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C Transaction ID : B-23690 Amount of Each Disbursement this Period 17.26
City CHARLOTTE	State NC	
Zip Code 28273	Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C Transaction ID : B-23467 Amount of Each Disbursement this Period 18.47
City CHARLOTTE	State NC	
Zip Code 28273	Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C Transaction ID : B-23496 Amount of Each Disbursement this Period 38.41
City CHARLOTTE	State NC	
Zip Code 28273	Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

74.14

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23580 Amount of Each Disbursement this Period [] 52.01	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23602 Amount of Each Disbursement this Period [] 35.43	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23605 Amount of Each Disbursement this Period [] 22.03	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 109.47
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23611 Amount of Each Disbursement this Period [REDACTED] 29.27	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23642 Amount of Each Disbursement this Period [REDACTED] 35.19	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 27 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23448 Amount of Each Disbursement this Period [REDACTED] 40.95	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type [REDACTED]
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 105.41
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 27 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23593
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 18.38
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 27 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23628
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 18.35
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 27 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23666
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 17.91
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)..... ▶

54.64

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23440
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 18.59
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23449
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 24.11
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23481
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 17.53
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 60.23
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23493
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 6.25
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23518
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 21.34
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23524
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 57.44
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)..... ▶

85.03

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)
A. PRINTFUL, INC

Date of Disbursement: MM / DD / YYYY
08 / 30 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : B-23538
Amount of Each Disbursement this Period: 36.33

Memo Item

Full Name (Last, First, Middle Initial)
B. PRINTFUL, INC

Date of Disbursement: MM / DD / YYYY
08 / 30 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : B-23569
Amount of Each Disbursement this Period: 16.94

Memo Item

Full Name (Last, First, Middle Initial)
C. PRINTFUL, INC

Date of Disbursement: MM / DD / YYYY
08 / 30 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : B-23575
Amount of Each Disbursement this Period: 18.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 72.17

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23577
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 5.62
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23581
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 31.74
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23582
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 21.59
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).....▶	[] 58.95
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23636 Amount of Each Disbursement this Period [] 35.40	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23646 Amount of Each Disbursement this Period [] 19.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23678 Amount of Each Disbursement this Period [] 16.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 72.28
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)
A. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
08 / 31 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23647
Amount of Each Disbursement this Period
65.84

Memo Item

Full Name (Last, First, Middle Initial)
B. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
09 / 01 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23475
Amount of Each Disbursement this Period
17.85

Memo Item

Full Name (Last, First, Middle Initial)
C. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
09 / 01 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23476
Amount of Each Disbursement this Period
21.78

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.47

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 01 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23504 Amount of Each Disbursement this Period [] 19.54	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 02 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23612 Amount of Each Disbursement this Period [] 18.25	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23556 Amount of Each Disbursement this Period [] 35.15	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 72.94
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23621 Amount of Each Disbursement this Period [REDACTED] 16.86
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23679 Amount of Each Disbursement this Period [REDACTED] 5.99
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23457 Amount of Each Disbursement this Period [REDACTED] 17.43
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 40.28
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23525 Amount of Each Disbursement this Period [] 18.30
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23606 Amount of Each Disbursement this Period [] 17.32
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23629 Amount of Each Disbursement this Period [] 16.29
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 51.91
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23633 Amount of Each Disbursement this Period [] 42.68
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23637 Amount of Each Disbursement this Period [] 17.21
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23648 Amount of Each Disbursement this Period [] 5.72
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 65.61
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23663
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 5.72
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23680
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 16.29
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 08 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23613
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 41.97
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 63.98

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23460	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 49.06
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23494	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 19.55
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23519	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 16.29
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 84.90
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23520
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 6.14
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23562
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 27.33
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23667
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 31.20
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 64.67
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 10 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23441	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 5.90
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 10 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23655	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 18.13
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23442	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 43.84
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 67.87
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)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC			Date of Disbursement MM / DD / YYYY 09 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR			FEC Identification Number C [] Transaction ID : B-23458 Amount of Each Disbursement this Period [] 48.45	
City CHARLOTTE	State NC	Zip Code 28273	Memo Item <input type="checkbox"/>	
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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:				

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC			Date of Disbursement MM / DD / YYYY 09 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR			FEC Identification Number C [] Transaction ID : B-23477 Amount of Each Disbursement this Period [] 68.52	
City CHARLOTTE	State NC	Zip Code 28273	Memo Item <input type="checkbox"/>	
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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:				

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC			Date of Disbursement MM / DD / YYYY 09 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR			FEC Identification Number C [] Transaction ID : B-23485 Amount of Each Disbursement this Period [] 54.67	
City CHARLOTTE	State NC	Zip Code 28273	Memo Item <input type="checkbox"/>	
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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:				

SUBTOTAL of Disbursements This Page (optional).....▶	[] 171.64
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23548 Amount of Each Disbursement this Period [] 37.03
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23578 Amount of Each Disbursement this Period [] 23.60
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23579 Amount of Each Disbursement this Period [] 27.21
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 87.84
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23643 Amount of Each Disbursement this Period [] 31.20	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 13 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23670 Amount of Each Disbursement this Period [] 16.29	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 15 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23526 Amount of Each Disbursement this Period [] 26.24	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 73.73
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C Transaction ID : B-23583 Amount of Each Disbursement this Period 28.52
City CHARLOTTE	State NC	
Zip Code 28273	Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 16 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C Transaction ID : B-23630 Amount of Each Disbursement this Period 20.62
City CHARLOTTE	State NC	
Zip Code 28273	Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 17 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C Transaction ID : B-23563 Amount of Each Disbursement this Period 52.85
City CHARLOTTE	State NC	
Zip Code 28273	Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	101.99
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 17 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23564 Amount of Each Disbursement this Period [] 18.71
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 17 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23671 Amount of Each Disbursement this Period [] 21.45
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 20 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23529 Amount of Each Disbursement this Period [] 19.94
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 60.10
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 20 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23557 Amount of Each Disbursement this Period [] 34.60
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 20 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23622 Amount of Each Disbursement this Period [] 19.53
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 20 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23644 Amount of Each Disbursement this Period [] 16.29
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 70.42
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 20 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23681 Amount of Each Disbursement this Period [] 32.93
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 21 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23607 Amount of Each Disbursement this Period [] 19.67
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 22 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23623 Amount of Each Disbursement this Period [] 20.05
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 72.65
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 24 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23443	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 19.59
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 27 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23478	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 18.11
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 27 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23514	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 19.74
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 57.44
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 27 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23565
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 6.07
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 27 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23649
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 31.49
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 27 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23691
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 34.54
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).....▶	[] 72.10
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23634 Amount of Each Disbursement this Period [] 5.53	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23672 Amount of Each Disbursement this Period [] 32.52	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 09 / 30 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23549 Amount of Each Disbursement this Period [] 20.41	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 58.46
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 04 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23444 Amount of Each Disbursement this Period [] 21.59
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 04 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23491 Amount of Each Disbursement this Period [] 15.35
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 04 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23505 Amount of Each Disbursement this Period [] 6.32
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 43.26
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 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. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
10 / 04 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23591
Amount of Each Disbursement this Period
6.04

Memo Item

Full Name (Last, First, Middle Initial)
B. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
10 / 06 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23446
Amount of Each Disbursement this Period
18.77

Memo Item

Full Name (Last, First, Middle Initial)
C. PRINTFUL, INC

Date of Disbursement
MM / DD / YYYY
10 / 06 / 2021

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : B-23447
Amount of Each Disbursement this Period
36.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.81

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)
A. PRINTFUL, INC

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 06 / 2021

FEC Identification Number
C
Transaction ID : B-23468
Amount of Each Disbursement this Period
17.85

Memo Item

Full Name (Last, First, Middle Initial)
B. PRINTFUL, INC

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 06 / 2021

FEC Identification Number
C
Transaction ID : B-23530
Amount of Each Disbursement this Period
6.47

Memo Item

Full Name (Last, First, Middle Initial)
C. PRINTFUL, INC

Mailing Address 11025 WESTLAKE DR

City CHARLOTTE State NC Zip Code 28273

Purpose of Disbursement
COST OF GOODS SOLD - MERCHANDISE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 06 / 2021

FEC Identification Number
C
Transaction ID : B-23534
Amount of Each Disbursement this Period
36.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.32

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)
A. PRINTFUL, INC

Date of Disbursement: / /

Mailing Address: 11025 WESTLAKE DR

City: CHARLOTTE State: NC Zip Code: 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate
 President Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : B-23594
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. PRINTFUL, INC

Date of Disbursement: / /

Mailing Address: 11025 WESTLAKE DR

City: CHARLOTTE State: NC Zip Code: 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate
 President Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : B-23682
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
C. PRINTFUL, INC

Date of Disbursement: / /

Mailing Address: 11025 WESTLAKE DR

City: CHARLOTTE State: NC Zip Code: 28273

Purpose of Disbursement: COST OF GOODS SOLD - MERCHANDISE

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate
 President Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : B-23506
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)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 12 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23595 Amount of Each Disbursement this Period [] 18.34	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 12 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23650 Amount of Each Disbursement this Period [] 59.58	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 14 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23558 Amount of Each Disbursement this Period [] 6.47	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 84.39
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 18 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED]	
City CHARLOTTE	State NC	Zip Code 28273	Transaction ID : B-23570
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type	Amount of Each Disbursement this Period [REDACTED] 36.49
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 20 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED]	
City CHARLOTTE	State NC	Zip Code 28273	Transaction ID : B-23469
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type	Amount of Each Disbursement this Period [REDACTED] 6.07
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 20 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED]	
City CHARLOTTE	State NC	Zip Code 28273	Transaction ID : B-23664
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type	Amount of Each Disbursement this Period [REDACTED] 5.85
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).....▶	[REDACTED] 48.41
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 21 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23656 Amount of Each Disbursement this Period [] 21.75
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 25 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23450 Amount of Each Disbursement this Period [] 6.09
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 25 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23535 Amount of Each Disbursement this Period [] 21.39
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 49.23
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 25 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23614 Amount of Each Disbursement this Period [] 32.99	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 25 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23657 Amount of Each Disbursement this Period [] 19.94	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 10 / 27 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23651 Amount of Each Disbursement this Period [] 20.85	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type []
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 73.78
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 01 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED]	
City CHARLOTTE	State NC	Zip Code 28273	Transaction ID : B-23550
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/Type [REDACTED]	Amount of Each Disbursement this Period 57.79
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 01 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED]	
City CHARLOTTE	State NC	Zip Code 28273	Transaction ID : B-23566
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/Type [REDACTED]	Amount of Each Disbursement this Period 19.94
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 01 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED]	
City CHARLOTTE	State NC	Zip Code 28273	Transaction ID : B-23624
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/Type [REDACTED]	Amount of Each Disbursement this Period 36.20
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).....▶	113.93
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 01 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23683 Amount of Each Disbursement this Period [] 20.66
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 09 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23507 Amount of Each Disbursement this Period [] 43.94
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 09 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23673 Amount of Each Disbursement this Period [] 58.93
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 123.53
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 10 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23531 Amount of Each Disbursement this Period [] 34.81
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 10 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23668 Amount of Each Disbursement this Period [] 9.99
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 12 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23542 Amount of Each Disbursement this Period [] 32.99
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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)..... ▶

77.79

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 12 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23592	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 32.99
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 12 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23608	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 32.99
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 15 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23625	
City CHARLOTTE	State NC	Zip Code 28273	Amount of Each Disbursement this Period [] 19.47
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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)..... ▶

85.45

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 15 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23658 Amount of Each Disbursement this Period [] 6.25
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 15 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23669 Amount of Each Disbursement this Period [] 18.69
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 18 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23539 Amount of Each Disbursement this Period [] 34.44
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 59.38
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 18 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23551 Amount of Each Disbursement this Period [] 5.70
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 19 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23451 Amount of Each Disbursement this Period [] 21.49
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 22 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23659 Amount of Each Disbursement this Period [] 16.94
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 44.13
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 11 / 30 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23645 Amount of Each Disbursement this Period [REDACTED] 69.98
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 02 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23609 Amount of Each Disbursement this Period [REDACTED] 19.36
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 07 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23486 Amount of Each Disbursement this Period [REDACTED] 36.88
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 126.22
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23452
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 6.17
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23461
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 34.44
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23508
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [] 34.97
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)..... ▶

75.58

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23521 Amount of Each Disbursement this Period [] 16.57
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23571 Amount of Each Disbursement this Period [] 16.29
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 14 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23527 Amount of Each Disbursement this Period [] 34.81
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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).....▶	[] 67.67
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 14 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23543
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 62.44
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 14 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23693
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 41.83
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 15 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23572
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Amount of Each Disbursement this Period [REDACTED] 38.05
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).....▶	[REDACTED] 142.32
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 17 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23584 Amount of Each Disbursement this Period 18.99	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE			
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 17 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23600 Amount of Each Disbursement this Period 35.30	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE			
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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021	
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [REDACTED] Transaction ID : B-23482 Amount of Each Disbursement this Period 8.99	
City CHARLOTTE	State NC	Zip Code 28273	Category/ Type
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE			
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).....▶	63.28
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 27 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23492 Amount of Each Disbursement this Period [] 17.22
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		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. PRINTFUL, INC		Date of Disbursement MM / DD / YYYY 12 / 28 / 2021
Mailing Address 11025 WESTLAKE DR		FEC Identification Number C [] Transaction ID : B-23515 Amount of Each Disbursement this Period [] 35.71
City CHARLOTTE	State NC	Zip Code 28273
Purpose of Disbursement COST OF GOODS SOLD - MERCHANDISE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. RESTON LIMOUSINE		Date of Disbursement MM / DD / YYYY 10 / 06 / 2021
Mailing Address 45685 ELMWOOD CT		FEC Identification Number C [] Transaction ID : B-23694 Amount of Each Disbursement this Period [] 297.00
City DULLES	State VA	Zip Code 20166
Purpose of Disbursement CAR SERVICE		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)..... ▶

349.93

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. RESTON LIMOUSINE

Full Name (Last, First, Middle Initial)

Mailing Address 45685 ELMWOOD CT

City DULLES State VA Zip Code 20166

Purpose of Disbursement CAR SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2021

FEC Identification Number: C

Transaction ID : B-23695

Amount of Each Disbursement this Period: 297.00

Memo Item

B. RM WARNER

Full Name (Last, First, Middle Initial)

Mailing Address 8283 N. HAYDEN RD SUITE 229

City SCOTTSDALE State AZ Zip Code 85258

Purpose of Disbursement LEGAL FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2021

FEC Identification Number: C

Transaction ID : B-23869

Amount of Each Disbursement this Period: 15000.00

Memo Item

C. ROBERT HAMILTON FOR AURORA

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2021

FEC Identification Number: C

Transaction ID : B-23713

Amount of Each Disbursement this Period: 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

16797.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. ROBS CREATIVE

Full Name (Last, First, Middle Initial)

Mailing Address 9707 ADMIRALTY DR

City SILVER SPRING State MD Zip Code 20910

Purpose of Disbursement DIGITAL ILLUSTRATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2021

FEC Identification Number: C

Transaction ID : B-23962

Amount of Each Disbursement this Period: 550.00

Memo Item

B. RODRIGUEZ, DANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 25 KEEN CT

City BROOKLYN State NY Zip Code 11229

Purpose of Disbursement WRITING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2021

FEC Identification Number: C

Transaction ID : B-23994

Amount of Each Disbursement this Period: 300.00

Memo Item

C. SHIRTS INTO PLOWSHARES

Full Name (Last, First, Middle Initial)

Mailing Address 109 HEDGE ROW LANE

City WEST CHESTER State PA Zip Code 19380

Purpose of Disbursement MERCHANDISE EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2021

FEC Identification Number: C

Transaction ID : B-23952

Amount of Each Disbursement this Period: 400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

A. SHIRTS INTO PLOWSHARES

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 109 HEDGE ROW LANE

M M M	/	D D D	/	Y Y Y Y Y
09		06		2021

City
WEST CHESTER

State
PA

Zip Code
19380

FEC Identification Number

Purpose of Disbursement
MERCHANDISE EXPENSE

C

Transaction ID : B-23951

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

800.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

B. SHOPIFY

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address OCONNOR STREET
GROUND FLOOR

M M M	/	D D D	/	Y Y Y Y Y
08		06		2021

City
OTTAWA ONT

State
DC

Zip Code
20000

FEC Identification Number

Purpose of Disbursement
ECOMMERCE SOFTWARE

C

Transaction ID : B-23872

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

30.74

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

C. SHOPIFY

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address OCONNOR STREET
GROUND FLOOR

M M M	/	D D D	/	Y Y Y Y Y
09		07		2021

City
OTTAWA ONT

State
DC

Zip Code
20000

FEC Identification Number

Purpose of Disbursement
ECOMMERCE SOFTWARE

C

Transaction ID : B-23873

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

30.74

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

861.48

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)
MISES PAC

Full Name (Last, First, Middle Initial)

A. SHOPIFY

Mailing Address **OCONNOR STREET
GROUND FLOOR**

City **OTTAWA ONT** State **DC** Zip Code **20000**

Purpose of Disbursement
ECOMMERCE SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 05 / 2021

FEC Identification Number

C

Transaction ID : B-23874

Amount of Each Disbursement this Period

30.74

Memo Item

Full Name (Last, First, Middle Initial)

B. SHOPIFY

Mailing Address **OCONNOR STREET
GROUND FLOOR**

City **OTTAWA ONT** State **DC** Zip Code **20000**

Purpose of Disbursement
ECOMMERCE SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 04 / 2021

FEC Identification Number

C

Transaction ID : B-23875

Amount of Each Disbursement this Period

30.74

Memo Item

Full Name (Last, First, Middle Initial)

C. SHOPIFY

Mailing Address **OCONNOR STREET
GROUND FLOOR**

City **OTTAWA ONT** State **DC** Zip Code **20000**

Purpose of Disbursement
ECOMMERCE SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-23876

Amount of Each Disbursement this Period

30.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

92.22

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. SIGN, ART, ETC

Mailing Address 181 SAGAMORE PARKWAY SOUTH

City LAFAYETTE State IN Zip Code 47905

Purpose of Disbursement
EVENT TABLING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23696

Amount of Each Disbursement this Period

[REDACTED] 279.82

Memo Item

Full Name (Last, First, Middle Initial)

B. SLAFTER, CELICIA, , ,

Mailing Address PO BOX 2183

City NORRISTOWN State PA Zip Code 19401

Purpose of Disbursement
STATE ORGANIZER

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23996

Amount of Each Disbursement this Period

[REDACTED] 1050.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SMOLDT, CALA, , ,

Mailing Address P.O. BOX 84

City ALEDO State IL Zip Code 61231

Purpose of Disbursement
VIDEOGRAPHER

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23997

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] 2329.82

[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. SOLUTIONARY

Mailing Address 9420 UNDERWOOD AVE

City
OMAHA

State
NE

Zip Code
68114

Purpose of Disbursement
NETWORK SECURITY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2021

FEC Identification Number

C

Transaction ID : B-23878

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City
DALLAS

State
TX

Zip Code
75235

Purpose of Disbursement
COMMERCIAL AIRFARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2021

FEC Identification Number

C

Transaction ID : B-23697

Amount of Each Disbursement this Period

542.96

Memo Item

Full Name (Last, First, Middle Initial)

C. SPIER, TYLER, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2021

FEC Identification Number

C

Transaction ID : B-24000

Amount of Each Disbursement this Period

250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2792.96

**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. SPIER, TYLER, , ,		Date of Disbursement MM / DD / YYYY 10 / 06 / 2021
Mailing Address		FEC Identification Number C
City	State	
Purpose of Disbursement POLITICAL CONTRIBUTION		Transaction ID : B-23999 Amount of Each Disbursement this Period 750.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. SPIER.LIBERTARIAN@GMAIL.COM		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021
Mailing Address		FEC Identification Number C
City	State	
Purpose of Disbursement PAYMENT		Transaction ID : B-23932 Amount of Each Disbursement this Period 250.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. STUDENTS INFO		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021
Mailing Address		FEC Identification Number C
City	State	
Purpose of Disbursement DATABASE INFORMATION		Transaction ID : B-23880 Amount of Each Disbursement this Period 1000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. TENTH AMENDMENT CENTER

Mailing Address 232 E. 2ND ST.
APT 102

City LOS ANGELES State CA Zip Code 90012

Purpose of Disbursement
EVENT SPEAKER FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2021

FEC Identification Number

C

Transaction ID : B-23926

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. THE BROWN HOTEL

Mailing Address 335 W BROADWAY

City LOUISVILLE State KY Zip Code 40202

Purpose of Disbursement
LODGING HOTEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2021

FEC Identification Number

C

Transaction ID : B-23882

Amount of Each Disbursement this Period

276.26

Memo Item

Full Name (Last, First, Middle Initial)

C. THE UPS STORE

Mailing Address 2202 18TH ST NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
DELIVERY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2021

FEC Identification Number

C

Transaction ID : B-23886

Amount of Each Disbursement this Period

212.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3189.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. THE UPS STORE

Mailing Address 2202 18TH ST NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
DELIVERY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23884

Amount of Each Disbursement this Period

[REDACTED] 80.44

Memo Item

Full Name (Last, First, Middle Initial)

B. THE UPS STORE

Mailing Address 2202 18TH ST NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
DELIVERY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23885

Amount of Each Disbursement this Period

[REDACTED] 185.50

Memo Item

Full Name (Last, First, Middle Initial)

C. VISTAPRINT

Mailing Address 100 HAYDEN AVE

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 12 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B-23900

Amount of Each Disbursement this Period

[REDACTED] 230.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 496.54

[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. WACKY BUTTONS		Date of Disbursement MM / DD / YYYY 07 / 07 / 2021
Mailing Address 101 LINCOLN PARKWAY SUITE A		FEC Identification Number C [] Transaction ID : B-23698 Amount of Each Disbursement this Period [] 62.53
City EAST ROCHESTER	State NY	Zip Code 14445
Purpose of Disbursement EVENT MATERIALS		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. WACKY BUTTONS		Date of Disbursement MM / DD / YYYY 07 / 13 / 2021
Mailing Address 101 LINCOLN PARKWAY SUITE A		FEC Identification Number C [] Transaction ID : B-23699 Amount of Each Disbursement this Period [] 209.72
City EAST ROCHESTER	State NY	Zip Code 14445
Purpose of Disbursement EVENT MATERIALS		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WACKY BUTTONS		Date of Disbursement MM / DD / YYYY 07 / 28 / 2021
Mailing Address 101 LINCOLN PARKWAY SUITE A		FEC Identification Number C [] Transaction ID : B-23700 Amount of Each Disbursement this Period [] 75.42
City EAST ROCHESTER	State NY	Zip Code 14445
Purpose of Disbursement EVENT MATERIALS		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).....▶	[] 347.67
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. WACKY BUTTONS

Mailing Address 101 LINCOLN PARKWAY
SUITE A

City EAST ROCHESTER State NY Zip Code 14445

Purpose of Disbursement
EVENT MATERIALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2021

FEC Identification Number

C

Transaction ID : B-23701

Amount of Each Disbursement this Period

61.36

Memo Item

Full Name (Last, First, Middle Initial)

B. WACKY BUTTONS

Mailing Address 101 LINCOLN PARKWAY
SUITE A

City EAST ROCHESTER State NY Zip Code 14445

Purpose of Disbursement
EVENT MATERIALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2021

FEC Identification Number

C

Transaction ID : B-23702

Amount of Each Disbursement this Period

61.36

Memo Item

Full Name (Last, First, Middle Initial)

C. WACKY BUTTONS

Mailing Address 101 LINCOLN PARKWAY
SUITE A

City EAST ROCHESTER State NY Zip Code 14445

Purpose of Disbursement
EVENT MATERIALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2021

FEC Identification Number

C

Transaction ID : B-23703

Amount of Each Disbursement this Period

85.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

208.35

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)
A. WACKY BUTTONS

Date of Disbursement: MM / DD / YYYY
11 / 12 / 2021

Mailing Address: 101 LINCOLN PARKWAY SUITE A

City: EAST ROCHESTER State: NY Zip Code: 14445

Purpose of Disbursement: EVENT MATERIALS

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **B-23704**
Amount of Each Disbursement this Period: 151.11

Memo Item

Full Name (Last, First, Middle Initial)
B. WALMART

Date of Disbursement: MM / DD / YYYY
09 / 23 / 2021

Mailing Address: 702 SW 8TH ST

City: BENTONVILLE State: AZ Zip Code: 72712

Purpose of Disbursement: OFFICE SUPPLIES

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **B-23902**
Amount of Each Disbursement this Period: 263.94

Memo Item

Full Name (Last, First, Middle Initial)
C. WALMART SUPER CENTER

Date of Disbursement: MM / DD / YYYY
08 / 05 / 2021

Mailing Address: 100 HAYDEN AVE

City: LEXINGTON State: MA Zip Code: 02421

Purpose of Disbursement: PRINTING

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **B-23906**
Amount of Each Disbursement this Period: 224.51

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 639.56

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial) A. WIECEK, MITCHELL, , ,		Date of Disbursement MM / DD / YYYY 08 / 05 / 2021	
Mailing Address 13809 CEPHEUS DRIVE		FEC Identification Number C [] Transaction ID : B-24001 Amount of Each Disbursement this Period [] 80.00	
City HUDSON	State FL	Zip Code 32828	Category/Type []
Purpose of Disbursement MERCHANDISE DESIGN			
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. WIN WITH WESLEY		Date of Disbursement MM / DD / YYYY 09 / 08 / 2021	
Mailing Address		FEC Identification Number C [] Transaction ID : B-23904 Amount of Each Disbursement this Period [] 1500.00	
City	State	Zip Code	Category/Type []
Purpose of Disbursement			
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. YOUNG AMERICANS FOR LIBERTY		Date of Disbursement MM / DD / YYYY 08 / 18 / 2021	
Mailing Address 500 N CAPITAL OF TEXAS HWY BLDG 5, STE 100		FEC Identification Number C [] Transaction ID : B-23714 Amount of Each Disbursement this Period [] 2345.00	
City AUSTIN	State TX	Zip Code 78746	Category/Type []
Purpose of Disbursement CONTRIBUTION			
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).....▶	[] 3925.00
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MISES PAC

Full Name (Last, First, Middle Initial)

A. ZOOM

Mailing Address 50 ALMADEN BLVD
SUITE 600

City
SAN JOSE

State
CA

Zip Code
95113

Purpose of Disbursement
VIRTUAL MEETING

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			22			2021					

FEC Identification Number

C

Transaction ID : B-23907

Amount of Each Disbursement this Period

158.89

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

158.89

122800.93

**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. BRIAN 4 BROOMFIELD		Date of Disbursement MM / DD / YYYY 10 / 01 / 2021
Mailing Address 1345 HOLLY DRIVE EAST		FEC Identification Number C [REDACTED] Transaction ID : B-23709 Amount of Each Disbursement this Period [REDACTED] 1562.50
City BROOMFIELD	State CO	Zip Code 80020
Purpose of Disbursement CAMPAIGN CONTRIBUTIONS NONFEDERAL		<input type="checkbox"/> 012 Category/Type
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. COMMITTEE TO ELECT GERRIT CAIN		Date of Disbursement MM / DD / YYYY 09 / 30 / 2021
Mailing Address 35 FAIRFIELD AVE		FEC Identification Number C [REDACTED] Transaction ID : B-23786 Amount of Each Disbursement this Period [REDACTED] 1502.00
City JAMESTOWN	State NY	Zip Code 14701
Purpose of Disbursement POLITICAL CONTRIBUTION NONFEDERAL		<input type="checkbox"/> 012 Category/Type
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. MCARDLE, ANGELA, , ,		Date of Disbursement MM / DD / YYYY 08 / 03 / 2021
Mailing Address 116 1/4 E AVENUE 42		FEC Identification Number C [REDACTED] Transaction ID : B-23984 Amount of Each Disbursement this Period [REDACTED] 500.00
City LOS ANGELES	State CA	Zip Code 90031
Purpose of Disbursement POLITICAL CONTRIBUTION NON-FEDERAL		<input type="checkbox"/> 012 Category/Type
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)..... ▶

[REDACTED] 3564.50

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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. MCARDLE, ANGELA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 116 1/4 E AVENUE 42

City LOS ANGELES State CA Zip Code 90031

Purpose of Disbursement POLITICAL CONTRIBUTION NON-FEDERAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2021

FEC Identification Number: C

Transaction ID : B-23983

Amount of Each Disbursement this Period: 700.00

Memo Item

B. MCARDLE, ANGELA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 116 1/4 E AVENUE 42

City LOS ANGELES State CA Zip Code 90031

Purpose of Disbursement POLITICAL CONTRIBUTION NON-FEDERAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2021

FEC Identification Number: C

Transaction ID : B-23985

Amount of Each Disbursement this Period: 450.00

Memo Item

C. VOTE LYLE WERT

Full Name (Last, First, Middle Initial)

Mailing Address 462 WEST 300 NORTH

City SPRINGVILLE State UT Zip Code 84663

Purpose of Disbursement POLITICAL CONTRIBUTION NON-FEDERAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2021

FEC Identification Number: C

Transaction ID : B-23396

Amount of Each Disbursement this Period: 520.83

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1670.83
TOTAL This Period (last page this line number only).....▶	5235.33