

**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

Defend Our Conservative Senate PAC (DOC'S PAC)

ADDRESS (number and street)

PO Box 26141

Check if different
than previously
reported. (ACC)

Alexandria

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00632323

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /
11D D D /
05Y Y Y Y Y Y /
2024in the
State of

KS

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y /

in the
State of

5. Covering Period

M M M /
10 01

D D D /

Y Y Y Y Y Y /
2024

through

M M M /
10 16

D D D /

Y Y Y Y Y Y /
2024

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

Type or Print Name of Treasurer

Marston, Chris, , ,

Signature of Treasurer

Marston, Chris, , ,

Date

M M M /
10 22

D D D /

Y Y Y Y Y Y /
2024

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Defend Our Conservative Senate PAC (DOC'S PAC)Report Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
10		01		2024

 To:

M M	/	D D	/	Y Y Y Y Y
10		16		2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2024		182404.50
(b) Cash on Hand at Beginning of Reporting Period.....	155221.68	
(c) Total Receipts (from Line 19)	25700.00	329693.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	180921.68	512098.00
7. Total Disbursements (from Line 31)	7457.73	338634.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	173463.95	173463.95
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Defend Our Conservative Senate PAC (DOC'S PAC)

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 01 2024

To:

M M / D D / Y Y Y Y
10 16 2024**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).....	22200.00	48750.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	22200.00	48750.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	3500.00	244000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	25700.00	292750.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	36943.50
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))	25700.00	329693.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25700.00	329693.50

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7457.73	204534.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7457.73	204534.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	115000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	19100.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7457.73	338634.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7457.73	338634.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	25700.00	292750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25700.00	292750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7457.73	204534.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7457.73	204534.05

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 14

☒ 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)

Defend Our Conservative Senate PAC (DOC'S PAC)

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

A. ASHLEY, WILLIAM, , ,

Mailing Address 19895 W 239TH

City
SPRING HILLState
KSZip Code
66083-3209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLIED NATIONALOccupation (for Individual)
CEO

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 16 2024

Transaction ID : SA11A.70221

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

B. BANKS, DAVID, , ,

Mailing Address 1030 17TH AVENUE SOUTH

City
NASHVILLEState
TNZip Code
37212-2255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ADVERTISING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 15 2024

Transaction ID : SA11A.70220

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

C. EVERETT ANDERSEN, LISA, , ,

Mailing Address 12160 S CHERRY LN

City
OLATHEState
KSZip Code
66061-8790FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
O'BRIEN PHARMACYOccupation (for Individual)
OWNER, PHARMACIST

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 07 2024

Transaction ID : SA11A.70187

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

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

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

8000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 14
(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)

Defend Our Conservative Senate PAC (DOC'S PAC)

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

A. GIBSON, DAVID, , ,

Mailing Address 3505 WEST 64TH STREET

City
MISSION HILLSState
KSZip Code
66208-1707FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
COMMODITY TRADING

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 / 09 / 2024

Transaction ID : SA11A.70188

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

B. HAVERTY, MICHAEL, , ,

Mailing Address 6410 WENONGA ROAD

City
MISSION HILLSState
KSZip Code
66208-1722FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

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
10 / 13 / 2024

Transaction ID : SA11A.70189

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

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

C. KLEIN, GREG, S., ,

Mailing Address 10804 WEST 141ST STREET

City
OVERLAND PARKState
KSZip Code
66221-8084FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INLAND TRUCK PARTS COMPANYOccupation (for Individual)
CEO

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 / 07 / 2024

Transaction ID : SA11A.70183

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 14

☒ 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)

Defend Our Conservative Senate PAC (DOC'S PAC)

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

A. NELSON, ERIC, , ,

Mailing Address 5421 NORTH 97 STREET

City
KANSAS CITYState
KSZip Code
66109-3016FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
FAMILY TREE NURSERYOccupation (for Individual)
OWNER/GROWER

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
10 / 01 / 2024**Transaction ID : SA11A.70182**

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

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

B. PENDLETON, BRUCE, , ,

Mailing Address 6444 INDIAN LANE

City
MISSION HILLSState
KSZip Code
66208-1716FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
BPENDLETONLTDOccupation (for Individual)
PRESIDENT

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 / 2024**Transaction ID : SA11A.70185**

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

C. SATTERLEE, CHARLES, C., DR.,

Mailing Address 8600 MISSION ROAD

City
PRAIRIE VILLAGEState
KSZip Code
66206-1449FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
ORTHOPEDIC HEALTH OF KANSAS CITYOccupation (for Individual)
PHYSICIAN - ORTHOPEDIC

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
10 / 07 / 2024**Transaction ID : SA11A.70184**

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 14
(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)

Defend Our Conservative Senate PAC (DOC'S PAC)

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

A. SATTERLEE, CHARLES, C., DR.,

Mailing Address 8600 MISSION ROAD

City
PRAIRIE VILLAGEState
KSZip Code
66206-1449FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ORTHOPEDIC HEALTH OF KANSAS CITYOccupation (for Individual)
PHYSICIAN - ORTHOPEDIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2024

Transaction ID : SA11A.70190

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. SUTHERLAND, MARK, B., ,

Mailing Address 4000 MAIN ST.

City
KANSAS CITYState
MOZip Code
64111-2313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUTHERLAND LUMBEROccupation (for Individual)
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 07 / 2024

Transaction ID : SA11A.70186

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

5500.00

22200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 14
(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)

Defend Our Conservative Senate PAC (DOC'S PAC)Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LUMEN TECHNOLOGIES, INC. POLITICAL ACTION COMMITTEEMailing Address 660 NORTH CAPITOL STREET
SUITE 240City
WASHINGTONState
DCZip Code
20001-3053FEC ID number of contributing
federal political committee.**C**

C00419911

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 08 / 2024

Transaction ID : SA11C.69147

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTIONFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE IMailing Address 600 13TH STREET, NW
SUITE 1000City
WASHINGTONState
DCZip Code
20005-3014FEC ID number of contributing
federal political committee.**C**

C00107235

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2024

Transaction ID : SA11C.69063

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTIONFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.

Mailing Address

City

State

Zip Code

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

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

3500.00

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

3500.00

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Defend Our Conservative Senate PAC (DOC'S PAC)

Transaction ID : SB21B.I24476

Memo Item

Transaction ID : SB21B.I24494
Amount of Each Disbursement this Period

✕ Memo Item

Transaction ID : SB21B.I2449
Amount of Each Disbursement this Period

 Memo Item

3301.62



SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 14

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 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)

Defend Our Conservative Senate PAC (DOC'S PAC)

Full Name (Last, First, Middle Initial)

A. US SENATE GIFT SHOP

Mailing Address FIRST STREET SOUTHEAST

City
WASHINGTONState
DCZip Code
20004

Purpose of Disbursement

DONOR RECOGNITION

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I24493

Amount of Each Disbursement this Period

2700.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. US SENATE GIFT SHOP

Mailing Address FIRST STREET SOUTHEAST

City
WASHINGTONState
DCZip Code
20004

Purpose of Disbursement

DONOR RECOGNITION

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I24493

Amount of Each Disbursement this Period

55.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. US SENATE GIFT SHOP

Mailing Address FIRST STREET SOUTHEAST

City
WASHINGTONState
DCZip Code
20004

Purpose of Disbursement

DONOR RECOGNITION

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I24493

Amount of Each Disbursement this Period

99.80

☒ Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 14

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 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)

Defend Our Conservative Senate PAC (DOC'S PAC)

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1920 MCKINNEY AVENUE

City
DALLASState
TXZip Code
75201

Purpose of Disbursement

CC PROCESSING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	2	4		

FEC Identification Number

C Transaction ID : SB21B.I2448

Amount of Each Disbursement this Period

650.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1920 MCKINNEY AVENUE

City
DALLASState
TXZip Code
75201

Purpose of Disbursement

CC PROCESSING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	2	4		

FEC Identification Number

C Transaction ID : SB21B.I2448

Amount of Each Disbursement this Period

240.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTION CFO

Mailing Address P.O. BOX 26141

City
ALEXANDRIAState
VAZip Code
22313

Purpose of Disbursement

COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	3			2	0	2	4		

FEC Identification Number

C Transaction ID : SB21B.I2447

Amount of Each Disbursement this Period

308.16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1199.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 14

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 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)

Defend Our Conservative Senate PAC (DOC'S PAC)

Full Name (Last, First, Middle Initial)

A. THE ELEVATED GROUP LLC

Mailing Address PO BOX 4333

City
CARTERSVILLEState
GAZip Code
30120Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				09				2024					

FEC Identification Number

C

Transaction ID : SB21B.I2447

Amount of Each Disbursement this Period

2956.65

☐ 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	M	/	D	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	M	/	D	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).....▶

2956.65

7457.73