

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) John Bolton Super PAC		FEC IDENTIFICATION NUMBER C C00542464
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Campaign Solutions		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2014
Mailing Address 117 N. Saint Asaph Street		Amount 842.54
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure emails	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2014
Name of Federal Candidate Thom R. Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1302792.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Campaign Solutions		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2014
Mailing Address 117 N. Saint Asaph Street		Amount 248.79
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure emails	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2014
Name of Federal Candidate Thomas Cotton	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 802566.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1091.33
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins
Signature

[Electronically Filed] Date MM / DD / YYYY **12 / 04 / 2014**