

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER C C00542464 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 02 / 01 / 2018 through 02 / 28 / 2018

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

Signature of Treasurer Hobbs, Cabell, , , [Electronically Filed] Date 03 / 20 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

John Bolton Super PAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2018"/> | | 2624828.78 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 2750551.09 | |
| (c) Total Receipts (from Line 19) | 423729.27 | 848938.55 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 3174280.36 | 3473767.33 |
| 7. Total Disbursements (from Line 31)..... | 141271.41 | 440758.38 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 3033008.95 | 3033008.95 |
| 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:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

John Bolton Super PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 02 / 01 / 2018 To: M M / D D / Y Y Y Y 02 / 28 / 2018

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 419500.00 | 844500.00 |
| (ii) Unitemized | 206.00 | 414.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 419706.00 | 844914.00 |
| (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) | 419706.00 | 844914.00 |
| 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)..... | 275.00 | 275.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 3748.27 | 3749.55 |
| 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)).....▶ | 423729.27 | 848938.55 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 423729.27 | 848938.55 |

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 | 66271.41 | 158898.38 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 66271.41 | 158898.38 |
| 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) | 75000.00 | 281860.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 141271.41 | 440758.38 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 141271.41 | 440758.38 |

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) | 419706.00 | 844914.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 419706.00 | 844914.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 66271.41 | 158898.38 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 275.00 | 275.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 65996.41 | 158623.38 |

**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 24 |
| <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)
John Bolton Super PAC

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

Mailing Address 9311 SAN PEDRO AVE
STE 600

City SAN ANTONIO State TX Zip Code 78216-

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

Name of Employer (for Individual) SOUTHWEST BUSINESS CORP. Occupation (for Individual) CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2018

Transaction ID : SA11A.207947

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. ANDERSON, DANA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 WILSHIRE BLVD.
SUITE 700

City SANTA MONICA State CA Zip Code 90401-1452

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

Name of Employer (for Individual) THE MACERICH COMPANY Occupation (for Individual) VICE CHAIRMAN OF THE BOARD/RE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2018

Transaction ID : SA11A.207772

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. BERNSTEIN, LAWRENCE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 E. HURON
SUITE 4002

City CHICAGO State IL Zip Code 60611-2932

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

Name of Employer (for Individual) AMBER MOUNTAIN Occupation (for Individual) PARTNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2018

Transaction ID : SA11A.208516

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 27000.00 |
| TOTAL This Period (last page this line 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 24 |
| <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)
John Bolton Super PAC

A. DAVISON, JAMES , E. , MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 607

| | | |
|----------------|-------------|--------------------|
| City RUSTON | State LA | Zip Code 71273- |
|----------------|-------------|--------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) DAVISON TRANSPORT, INC. | Occupation (for Individual) CHAIRMAN OF THE BOARD |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 05 | / | 2018 |

Transaction ID : SA11A.207773

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. FALIC, SIMON, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6100 HOLLYWOOD BLVD., 7TH FLOOR

| | | |
|-------------------|-------------|--------------------|
| City HOLLYWOOD | State FL | Zip Code 33024- |
|-------------------|-------------|--------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) DUTY FREE AMERICAS | Occupation (for Individual) EXECUTIVE |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 14 | / | 2018 |

Transaction ID : SA11A.208420

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. FINDER, LAWRENCE, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4919 WILLIAMS COURT LANE

| | | |
|-----------------|-------------|------------------------|
| City HOUSTON | State TX | Zip Code 77081-2103 |
|-----------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) HAYNES & BOONE, L.L.P. | Occupation (for Individual) ATTORNEY |
|---|---|

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 |
| 02 | / | 06 | / | 2018 |

Transaction ID : SA11A.207946

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 50500.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 24 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

A. FOUTCH, RANDY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 W. 6TH ST., STE 900
 City TULSA State OK Zip Code 74119-5415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAREDO PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 12 / 2018
Transaction ID : SA11A.208277
 Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

B. FOX, SAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7701 FORSYTH BLVD. STE 600
 City SAINT LOUIS State MO Zip Code 63105-1875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARBOUR GROUP Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 02 / 20 / 2018
Transaction ID : SA11A.208511
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

C. HAMISTER, MARK, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2445 S. OCEAN BLVD
 City HIGHLAND BEACH State FL Zip Code 33487-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMISTER GROUP Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 02 / 2018
Transaction ID : SA11A.207422
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 32000.00 |
| TOTAL This Period (last page this line 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 24 |
| | <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)
John Bolton Super PAC

A. LAUFER, WAYNE, , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4989 JOEWOOD DRIVE
 City SANIBEL State FL Zip Code 33957-
 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 ▼ 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2018
Transaction ID : SA11A.207280
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. LEVY, STEVEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 PECKSLAND ROAD
 City GREENWICH State CT Zip Code 06831-3711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2018
Transaction ID : SA11A.207216
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. MCNEIL, CAROLE, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 CALIFORNIA STREET
 City SAN FRANCISCO State CA Zip Code 94108-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCNEIL CAPITAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2018
Transaction ID : SA11A.207423
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 40000.00 |
| TOTAL This Period (last page this line 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 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

A. MOONEY, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7038 N BEACH DRIVE
 City FOX POINT State WI Zip Code 53217-
 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 ▼ 5000.00

Date of Receipt 02 / 07 / 2018
Transaction ID : SA11A.210091
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. ROSE, DOUGLAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11550 HUSSEY LN
 City CARMEL State IN Zip Code 46032-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IRWIN ROSE & CO. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 27 / 2018
Transaction ID : SA11A.208940
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. RUST, ROBERT, W., COL,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1430 S DIXIE HWY
 City CORAL GABLES State FL Zip Code 33146-3176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USMCR Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 14 / 2018
Transaction ID : SA11A.208421
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 20000.00
TOTAL This Period (last page this line 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 24
(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"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UIHLEIN, RICHARD, E., MR.,

Mailing Address **1396 N. WAUKEGAN ROAD**

| | | |
|----------------------------|--------------------|-------------------------------|
| City LAKE FOREST | State IL | Zip Code 60045-1147 |
|----------------------------|--------------------|-------------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) ULINE | Occupation (for Individual) C.E.O./OWNER |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt
02 / 27 / 2018

Transaction ID : SA11A.209019

Amount of Each Receipt this Period
250000.00

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).....▶ | 250000.00 |
| TOTAL This Period (last page this line number only).....▶ | 419500.00 |

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

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

FOR LINE NUMBER: PAGE 12 OF 24
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

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

Mailing Address 117 N ST. ASAPH STREET

| | | |
|--------------------|-------------|-------------------|
| City ALEXANDRIA | State VA | Zip Code 22314 |
|--------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3747.11

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 06 | / | 2018 |

Transaction ID : SA45.999

Amount of Each Receipt this Period
3747.11

Memo Item
LIST RENTAL INCOME

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

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 M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

Memo Item

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 M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3747.11 |
| TOTAL This Period (last page this line number only)..... | 3747.11 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. FLAVIN, KATHY, , ,

Date of Disbursement: MM / DD / YYYY
02 / 02 / 2018

Mailing Address: 1730 M ST NW STE 611

City: WASHINGTON State: DC Zip Code: 20036

Purpose of Disbursement: PAYROLL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **SB100.424**
Amount of Each Disbursement this Period: 1069.22

Memo Item

Full Name (Last, First, Middle Initial)
B. FLAVIN, KATHY, , ,

Date of Disbursement: MM / DD / YYYY
02 / 15 / 2018

Mailing Address: 1730 M ST NW STE 611

City: WASHINGTON State: DC Zip Code: 20036

Purpose of Disbursement: PAYROLL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **SB100.425**
Amount of Each Disbursement this Period: 1069.23

Memo Item

Full Name (Last, First, Middle Initial)
C. SAMUELIAN, CHRISTINE, , ,

Date of Disbursement: MM / DD / YYYY
02 / 02 / 2018

Mailing Address: 1730 M ST NW STE 611

City: WASHINGTON State: DC Zip Code: 20036

Purpose of Disbursement: PAYROLL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **SB100.408**
Amount of Each Disbursement this Period: 1105.11

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3243.56

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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)
A. SAMUELIAN, CHRISTINE, , ,

Date of Disbursement: MM / DD / YYYY
02 / 15 / 2018

Mailing Address: 1730 M ST NW STE 611

City: WASHINGTON State: DC Zip Code: 20036

Purpose of Disbursement: PAYROLL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: C
Transaction ID : **SB100.409**
Amount of Each Disbursement this Period: 1105.12

Memo Item

Full Name (Last, First, Middle Initial)
B. TINSLEY, SARAH, , ,

Date of Disbursement: MM / DD / YYYY
02 / 02 / 2018

Mailing Address: 1730 M ST NW STE 611

City: WASHINGTON State: DC Zip Code: 20036

Purpose of Disbursement: PAYROLL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: C
Transaction ID : **SB100.426**
Amount of Each Disbursement this Period: 2612.57

Memo Item

Full Name (Last, First, Middle Initial)
C. TINSLEY, SARAH, , ,

Date of Disbursement: MM / DD / YYYY
02 / 15 / 2018

Mailing Address: 1730 M ST NW STE 611

City: WASHINGTON State: DC Zip Code: 20036

Purpose of Disbursement: PAYROLL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: C
Transaction ID : **SB100.427**
Amount of Each Disbursement this Period: 2612.57

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6330.26

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)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. ADP

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 02 | | 2018 |

Mailing Address 6402 ARLINGTON BLVD

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB100.390

Amount of Each Disbursement this Period

| |
|---------|
| 2006.33 |
|---------|

Memo Item

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL TAXES

| |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. ADP

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 09 | | 2018 |

Mailing Address 6402 ARLINGTON BLVD

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB100.391

Amount of Each Disbursement this Period

| |
|-------|
| 69.25 |
|-------|

Memo Item

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL SERVICES

| |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. ADP

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 12 | | 2018 |

Mailing Address 6402 ARLINGTON BLVD

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB100.392

Amount of Each Disbursement this Period

| |
|------|
| 5.15 |
|------|

Memo Item

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL TAXES

| |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

| |
|---------|
| 2080.73 |
|---------|

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

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| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB100.393
Amount of Each Disbursement this Period
1945.62

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB100.394
Amount of Each Disbursement this Period
7.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB100.395
Amount of Each Disbursement this Period
254.04

Memo Item

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

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

2206.66

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

A. ADP

Full Name (Last, First, Middle Initial)
Mailing Address 6402 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement PAYROLL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 23 / 2018

FEC Identification Number: C

Transaction ID : SB100.396

Amount of Each Disbursement this Period: 69.25

Memo Item

B. ADVANCED DATA SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 248

City OLDSMAR State FL Zip Code 34677

Purpose of Disbursement DATA MANAGEMENT SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB100.397

Amount of Each Disbursement this Period: 294.11

Memo Item

C. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)
Mailing Address 200 VESEY STREET

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 05 / 2018

FEC Identification Number: C

Transaction ID : SB100.398

Amount of Each Disbursement this Period: 578.30

Memo Item

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

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

941.66

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

| | | | |
|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial) A. BB&T - VISA | | | Date of Disbursement MM / DD / YYYY 02 / 02 / 2018 |
| Mailing Address PO BOX 580340 | | | FEC Identification Number C [] Transaction ID : SB21B.970 Amount of Each Disbursement this Period [] 1436.33 |
| City CHARLOTTE | State NC | Zip Code 28258 | SUB-VENDORS REQUIRING ITEMIZATION ARE SHOWN BELOW |
| Purpose of Disbursement CREDIT CARD PAYMENT | | 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) ▼ | | <input type="checkbox"/> Memo Item |
| State: District: | | | |

| | | | |
|---|--|--------------------------|--|
| Full Name (Last, First, Middle Initial) B. MICROSOFT | | | Date of Disbursement MM / DD / YYYY 02 / 01 / 2018 |
| Mailing Address 15010 NE 36TH ST | | | FEC Identification Number C [] Transaction ID : SB21B.973 Amount of Each Disbursement this Period [] 105.75 |
| City REDMOND | State WA | Zip Code 98052 | <input checked="" type="checkbox"/> Memo Item |
| Purpose of Disbursement OFFICE SUPPLIES | | 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. MICROSOFT | | | Date of Disbursement MM / DD / YYYY 02 / 01 / 2018 |
| Mailing Address 15010 NE 36TH ST | | | FEC Identification Number C [] Transaction ID : SB21B.974 Amount of Each Disbursement this Period [] 42.30 |
| City REDMOND | State WA | Zip Code 98052 | <input checked="" type="checkbox"/> Memo Item |
| Purpose of Disbursement OFFICE SUPPLIES | | 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)..... ▶ | [] 1436.33 |
| TOTAL This Period (last page this line number only)..... ▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. PMI MONTHLY PARKING

Mailing Address 1227 20TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.972

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH STREET

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB100.406

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH STREET

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB100.407

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 05 | | 2018 |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

FEC Identification Number

C []

Transaction ID : SB100.410

Amount of Each Disbursement this Period

[] 7439.92

Memo Item

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

Full Name (Last, First, Middle Initial)

B. CMDI

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 12 | | 2018 |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

FEC Identification Number

C []

Transaction ID : SB100.411

Amount of Each Disbursement this Period

[] 29.90

Memo Item

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

Full Name (Last, First, Middle Initial)

C. CMDI

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 13 | | 2018 |

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

FEC Identification Number

C []

Transaction ID : SB100.412

Amount of Each Disbursement this Period

[] 100.00

Memo Item

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

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

[] 7569.82

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2018

FEC Identification Number

C []

Transaction ID : SB100.413

Amount of Each Disbursement this Period

[] 20.30

Memo Item

Full Name (Last, First, Middle Initial)

B. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2018

FEC Identification Number

C []

Transaction ID : SB100.414

Amount of Each Disbursement this Period

[] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CORT BUSINESS SERVICES

Mailing Address PO BOX 17401

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2018

FEC Identification Number

C []

Transaction ID : SB100.417

Amount of Each Disbursement this Period

[] 1553.91

Memo Item

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

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

[] 4074.21

[]

**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)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. HILLTOP CONSULTANTS

Mailing Address 4201 CONNECTICUT AVENUE NW
STE 500

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
COMPUTER SERVICES / SUPPORT

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB100.419
Amount of Each Disbursement this Period
925.31

Memo Item

Full Name (Last, First, Middle Initial)

B. HOLLOWAY CONSULTING, INC.

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB100.420
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HOLLOWAY CONSULTING, INC.

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2018

FEC Identification Number

C
Transaction ID : SB100.421
Amount of Each Disbursement this Period
32500.00

Memo Item

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

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

35425.31

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. HOLLOWAY CONSULTING, INC.

Mailing Address 2300 CLARENDON BLVD.
STE 1306

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
FUNDRAISING SERVICES

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
02 / 26 / 2018

FEC Identification Number

C

Transaction ID : SB100.422

Amount of Each Disbursement this Period

2104.99

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).....▶

2104.99

66077.82

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) John Bolton Super PAC
FEC IDENTIFICATION NUMBER C C00542464

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CONNELL DONATELLI INC
Mailing Address 117 NORTH SAINT ASAPH STREET
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA
Name of Federal Candidate: NICHOLSON, KEVIN, , ,
Calendar Year-To-Date Per Election for Office Sought 231860.00
Disbursement For: Primary

Full Name of Payee CONNELL DONATELLI INC
Mailing Address 117 NORTH SAINT ASAPH STREET
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA
Name of Federal Candidate: NICHOLSON, KEVIN, , ,
Calendar Year-To-Date Per Election for Office Sought 281860.00
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 75000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 75000.00

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.

HOBBS, CABELL, , ,

[Electronically Filed]

Date 03 / 20 / 2018

Signature